| Fill in this information to identify your case: |                                 |                                 |
|---|---------------------------------|---------------------------------|
| United States Bankruptcy Court for the:         |                                 |                                 |
| NORTHERN DISTRICT OF OHIO                       | _                               |                                 |
| Case number (if known)                          | _ Chapter you are filing under: |                                 |
|   | ■ Chapter 7                     |                                 |
|   | ☐ Chapter 11                    |                                 |
|   | ☐ Chapter 12                    |                                 |
|   | ☐ Chapter 13                    | Check if this an amended filing |

# Official Form 101

# **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself  |  |  |                      |
|----|--|--|--|----------------------|
|    |  | About Debtor 1:  | About Debtor 2 (Spouse On                                | ly in a Joint Case): |
| 1. | Your full name   |  |  |                      |
|    | Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee. | Mark First name  Edward Middle name  Cunningham Last name and Suffix (Sr., Jr., II, III) | First name  Middle name  Last name and Suffix (Sr., Jr., | II, III)             |
| 2. | All other names you hav<br>used in the last 8 years<br>Include your married or<br>maiden names.  | e  |  |                      |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)  | xxx-xx-1289  |  |                      |

Official Form 101

|    |  | About Debtor 1:   | About Debtor 2 (Spouse Only in a Joint Case):  |
|----|--|---|--|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs.  Business name(s)  EINs  | ☐ I have not used any business name or EINs.  Business name(s)  EINs   |
| 5. | Where you live   |   | If Debtor 2 lives at a different address:  |
|    |  | 35 Manor Rd. apt. B Akron, OH 44313 Number, Street, City, State & ZIP Code  | Number, Street, City, State & ZIP Code   |
|    |  | Summit County   | County   |
|    |  | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
|    |  | Number, P.O. Box, Street, City, State & ZIP Code  | Number, P.O. Box, Street, City, State & ZIP Code   |
| 6. | Why you are choosing this district to file for   | Check one:  | Check one:   |
|    | bankruptcy   | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                                | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.                       |
|    |  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)  | ☐ I have another reason.<br>Explain. (See 28 U.S.C. § 1408.)   |
|    |  |   |  |

| Deb | tor 1 Mark Edward Cunr  | ningham                |   | Case number (if known)  |
|-----|---|------------------------|---|---|
|     |   |                        |   |   |
| Par | Report About Any Bu   | usinesses              | You Own as a Sole Pro                             | pprietor  |
| 12. | Are you a sole proprietor of any full- or part-time business?   | ■ No.                  | Go to Part 4.                                     |   |
|     |   | ☐ Yes.                 | Name and location of                              | of business   |
|     | A sole proprietorship is a<br>business you operate as<br>an individual, and is not a<br>separate legal entity such<br>as a corporation,<br>partnership, or LLC. |                        | Name of business, if                              | any   |
|     | If you have more than one sole proprietorship, use a separate sheet and attach  |                        | Number, Street, City                              | r, State & ZIP Code   |
|     | it to this petition.  |                        | Check the appropria                               | te box to describe your business:   |
|     |   |                        | ☐ Health Care                                     | Business (as defined in 11 U.S.C. § 101(27A))   |
|     |   |                        | ☐ Single Asset                                    | Real Estate (as defined in 11 U.S.C. § 101(51B))  |
|     |   |                        | Stockbroker                                       | (as defined in 11 U.S.C. § 101(53A))  |
|     |   |                        | ☐ Commodity E                                     | Broker (as defined in 11 U.S.C. § 101(6))   |
|     |   |                        | ☐ None of the a                                   | above   |
|     | Chapter 11 of the<br>Bankruptcy Code and are<br>you a small business<br>debtor?   | operatior<br>in 11 U.S |   | are a small business debtor, you must attach your most recent balance sheet, statement of and federal income tax return or if any of these documents do not exist, follow the procedure Chapter 11. |
|     | For a definition of <i>small</i> business debtor, see 11 U.S.C. § 101(51D).   | ■ No.                  | -   | apter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy  |
|     |   | ☐ Yes.                 | I am filing under Cha                             | apter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.   |
| ar  | t 4: Report if You Own or   | · Have Any             | y Hazardous Property o                            | or Any Property That Needs Immediate Attention  |
| 4.  | Do you own or have any  | ■ No.                  |   |   |
|     | property that poses or is<br>alleged to pose a threat<br>of imminent and<br>identifiable hazard to  | ☐ Yes.                 | What is the hazard?                               |   |
|     | public health or safety?<br>Or do you own any<br>property that needs<br>immediate attention?  |                        | If immediate attention is needed, why is it needs |   |
|     | For example, do you own perishable goods, or livestock that must be fed, or a building that needs   |                        | Where is the property?                            |   |
|     | urgent repairs?   |                        |   | Number, Street, City, State & Zip Code  |
|     |   |                        |   |   |
|     |   |                        |   |   |
|     |   |                        |   |   |

#### Part 5:

### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

#### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

 ☐ I am not required to receive a briefing about credit counseling because of:

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

#### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of:                               |

#### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

#### □ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Official Form 101

| Deb  | otor 1 Mark Edward Cunn   | ingham  |  | Case number (if k   | nown)   |
|--|---|---|--|---|---|
| Par  | t 6: Answer These Questi  | ons for Repo  | orting Purposes                                |   |   |
| 16.  | What kind of debts do you have?   | 16a. <b>A</b>   |  | ner debts? Consumer debts are defined family, or household purpose."  | in 11 U.S.C. § 101(8) as "incurred by an  |
|  |   |   | No. Go to line 16b.                            |   |   |
|  |   |   | Yes. Go to line 17.                            |   |   |
|  |   |   |  | ss debts? Business debts are debts that are through the operation of the business   |   |
|  |   |   | No. Go to line 16c.                            |   |   |
|  |   |   | Yes. Go to line 17.                            |   |   |
|  |   | 16c. St   | ate the type of debts you owe that             | at are not consumer debts or business de  | bts   |
| 17.  | Are you filing under Chapter 7?   | □ No. I a   | am not filing under Chapter 7. Go              | to line 18.   |   |
| Do you estimate that<br>after any exempt<br>property is excluded a<br>administrative expense |   | <b>—</b> res. ar  |  | u estimate that after any exempt property e to distribute to unsecured creditors?   | is excluded and administrative expenses   |
|  | are paid that funds will<br>be available for<br>distribution to unsecured<br>creditors? |   | l Yes  |   |   |
| 18.  | How many Creditors do you estimate that you owe?  | ■ 1-49<br>□ 50-99<br>□ 100-199<br>□ 200-999                 |  | ☐ 1,000-5,000<br>☐ 5001-10,000<br>☐ 10,001-25,000   | ☐ 25,001-50,000<br>☐ 50,001-100,000<br>☐ More than100,000   |
| 19.  | How much do you estimate your assets to be worth?                                       | □ \$0 - \$50,<br>□ \$50,001 =<br>■ \$100,001<br>□ \$500,001 | - \$100,000<br>- \$500,000                     | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | ☐ \$500,000,001 - \$1 billion ☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion |
| 20.  | How much do you estimate your liabilities to be?  | □ \$0 - \$50,<br>□ \$50,001<br>■ \$100,001<br>□ \$500,001   | - \$100,000<br>- \$500,000                     | □ \$1,000,001 - \$10 million □ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million | □ \$500,000,001 - \$1 billion □ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion □ More than \$50 billion |
| Par  | t 7: Sign Below   |   |  |   |   |
| For  | you   | I have exam   | ined this petition, and I declare u            | Inder penalty of perjury that the information   | n provided is true and correct.   |
|  |   |   |  | aware that I may proceed, if eligible, und vailable under each chapter, and I choose                                      |   |
|  |   |   |  | y or agree to pay someone who is not an ce required by 11 U.S.C. § 342(b).  | attorney to help me fill out this   |
|  |   | I request rel   | ief in accordance with the chapte              | er of title 11, United States Code, specified   | d in this petition.   |
|  |   | bankruptcy of and 3571.                                     | case can result in fines up to \$25            | ealing property, or obtaining money or pro<br>0,000, or imprisonment for up to 20 years                                   |   |
|  |   |   | dward Cunningham<br>ard Cunningham<br>Debtor 1 | Signature of Debtor 2   |   |
|  |   | Executed or   | April 16, 2019<br>MM / DD / YYYY               | Executed on MM / DD   | D/YYYY  |

| Debtor 1 | Mark Edward Cunningham | Case number (if known)                |  |
|----------|------------------------|---------------------------------------|--|
|          |                        | · · · · · · · · · · · · · · · · · · · |  |

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| Date -        | April 16, 2019<br>MM / DD / YYYY |
|---------------|----------------------------------|
|               |                                  |
|               |                                  |
|               |                                  |
| Email address | dean@paoluccilawfirm.com         |
|               |                                  |
|               | - ""                             |

| Debtor 1 Mark Edward Cunningham Prior Name United States Bankruptcy Court for the: MORTHERN DISTRICT OF OHIO  Case number (History)  Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first, then complete the information in this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Fat 1: Summarize Your Assets  Your assets  Value of what you own  1. Schedule AfB: Property (Official Form 106A/B)  1a. Copy line 62, Total personal property, from Schedule A/B.  1b. Copy line 62, Total personal property, from Schedule A/B.  1c. Copy line 63, Total of all property on Schedule A/B.  2c. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106E)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 60 of Schedule E/F.  3a. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 60 of Schedule E/F.  4. Schedule E/F. Creditors Who Have Unsecured Claims (Official Form line 60 of Schedule E/F.  3a. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 60 of Schedule E/F.  4. Schedule E/F. Vaur Income (Official Form 106I)  5. Schedule E/F. Vaur Income (Official Form 106I)  6. Schedule E/F. Vaur Income (Official Form 106I)  6. Schedule E/F. Vaur Income (Official Form 106I)  7. What kind of debt do you have?  8. Vaur debts are primarily consumer debts. Consumer debts     | Fill in                | this information to i   | dentify your                                      | 2250  |   |              |             |
|---|------------------------|---|---|---|---|--------------|-------------|
| Debtor 2 (Season & Horse) First Name Mode Name Lax Name United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO    Check if this is an amended filling  |                        |   |   |   |   |              |             |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF OHIO  Case number (it never)  Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate a speciable. If two married people are filing together, both are equally responsible for supplying correct information, Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part II:  Summarize Your Assets  Your assets  Value of what you own  1. Schedule A/B: Property (Official Form 106A/8) 1a. Copy line 55, Total real estate, from Schedule A/B.  1b. Copy line 57, Total real estate, from Schedule A/B.  1c. Copy line 63, Total of all property on Schedule A/B.  1c. Copy line 63, Total of all property on Schedule A/B.  2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.  3. Schedule E/F: Creditors Who Have Claims Secured by Property (Official Form 106E/F) 3a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D.  \$ 151,133.00  3. Schedule E/F: Creditors Who Have Claims Secured by Property (Official Form 106E/F) 3a. Copy the total claims from Part 1 (prionty unsecured claims) from line 6 of Schedule E/F.  \$ 21,933.00  Your total liabilities  \$ 173,066.00  Part 3: Summarize Your Income and Expenses  4 Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I.  Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I.  Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I.  Schedule I: Your Income (Official Form 106I) Copy your monthly expenses from line 22 of Schedule I.  Sched | Debio                  | - Widin E   |   |   | Last Name   |              |             |
| Case number   Check if this is an amended filing    Official Form 106Sum   12/15    Summary of Your Assets and Liabilities and Certain Statistical Information   12/15    Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Port 3   Summarize Your Assets   Your assets   Your assets   Your asset   Your as    |                        |   | e   | Middle Name                                     | Last Name   |              |             |
| Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Ba as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form, if you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1:  Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 56, Total real estate, from Schedule A/B   | United                 | States Bankruptcy C   | ourt for the:                                     | NORTHERN DISTRIC                                | Т ОГ ОНЮ  |              |             |
| Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Ba as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form, if you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1:  Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 56, Total real estate, from Schedule A/B   | Case                   | number  |   |   |   |              |             |
| Official Form 106Sum  Summary of Your Assets and Liabilities and Certain Statistical Information  12/15  Be as complete and accurate as possible, if two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part I:  Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B   |                        |   |   | <del></del>                                     |   | _            |             |
| Burnmary of Your Assets and Liabilities and Certain Statistical Information  12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 62. Total real estate, from Schedule A/B  |                        |   |   |   |   | amei         | naea ming   |
| Burnmary of Your Assets and Liabilities and Certain Statistical Information  12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.  Part 1: Summarize Your Assets  Your assets Value of what you own  1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 62. Total real estate, from Schedule A/B  | ∩ffi∂                  | sial Form 10  | 6Sum  |   |   |              |             |
| Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules fast; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.    Part 1:   Summarize Your Assets   Your assets  |                        |   |   | and Liabilities a                               | nd Certain Statistical Information  |              | 12/15       |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 62, Total real estate, from Schedule A/B   | Be as of inform your o | complete and accura<br>ation. Fill out all of y<br>riginal forms, you m | ate as possib<br>our schedule<br>ust fill out a r | le. If two married peoples first; then complete | le are filing together, both are equally responsible f<br>the information on this form. If you are filing amend |              |             |
| 1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 62, Total real estate, from Schedule A/B   |                        |   |   |   |   | Your         | assets      |
| 1a. Copy line 55, Total real estate, from Schedule A/B  |                        |   |   |   |   |              |             |
| 1c. Copy line 63, Total of all property on Schedule A/B   | 1. S                   | chedule A/B: Prope<br>a. Copy line 55, Total                            | rty (Official Fo<br>real estate, fr               | orm 106A/B)<br>om Schedule A/B                  |   | \$           | 95,620.00   |
| Part 2: Summarize Your Liabilities  Your Idabilities Amount you owe  2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  \$ 151,133.00  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F  | 1                      | b. Copy line 62, Total  | personal prop                                     | perty, from Schedule A/B                        |   | \$           | 42,747.00   |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  \$ 151,133.00  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F   | 1                      | c. Copy line 63, Total  | of all property                                   | on Schedule A/B                                 |   | \$           | 138,367.00  |
| 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F  | Part 2                 | Summarize You   | Liabilities                                       |   |   |              |             |
| 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D \$ 151,133.00  3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F  |                        |   |   |   |   |              |             |
| 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i>   |                        |   |   |   |   | \$           | 151,133.00  |
| Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  |                        |   |   |   |   | \$           | 0.00        |
| Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | 3                      | b. Copy the total clai  | ms from Part 2                                    | 2 (nonpriority unsecured                        | claims) from line 6j of Schedule E/F  | \$           | 21,933.00   |
| Part 3: Summarize Your Income and Expenses  4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  |                        |   |   |   |   |              |             |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  |                        |   |   |   | Your total liabilities  | \$           | 173,066.00  |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I  | Dort 2                 | Summaria Vau  |   | Evnance   |   |              |             |
| Copy your combined monthly income from line 12 of Schedule I  |                        |   |   | -   |   |              |             |
| Copy your monthly expenses from line 22c of Schedule J  |                        |   |   |   | le I  | \$           | 2,824.00    |
| <ul> <li>6. Are you filing for bankruptcy under Chapters 7, 11, or 13?</li> <li>□ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> <li>▼ Yes</li> <li>7. What kind of debt do you have?</li> </ul>   |                        |   |   |   |   | \$           | 4,244.00    |
| <ul> <li>No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.</li> <li>Yes</li> <li>What kind of debt do you have?</li> </ul>   | Part 4                 | Answer These C  | uestions for                                      | Administrative and Sta                          | tistical Records  |              |             |
| Yes 7. What kind of debt do you have?   | _                      |   |   | • • •   |   | our other so | chedules.   |
|   | 7. V                   | Yes   |   | -   | ·   |              |             |
|   | •                      |   |   | sumer debts. Consumo:                           | r dahte are those "incurred by an individual primorily for  | a nercono    | I family or |

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information page 1 of 2

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8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$\_\_\_\_\_3,662.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

|  | Total cla | im   |
|--|-----------|------|
| From Part 4 on Schedule E/F, copy the following:   |           |      |
| 9a. Domestic support obligations (Copy line 6a.)   | \$        | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.)  | \$        | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)  | \$        | 0.00 |
| 9d. Student loans. (Copy line 6f.)   | \$        | 0.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$        | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)                                       | +\$       | 0.00 |
| 9g. <b>Total.</b> Add lines 9a through 9f.   | \$        | 0.00 |

| Debtor 1                        | Ma                                | rk Edward                      | Cunningham                     |  |  |  |  |  |
|---------------------------------|-----------------------------------|--------------------------------|--------------------------------|--|--|--|--|--|
| DODIOI I                        |                                   | Name                           |                                | Name   | Last Name  |  |  |  |
| Debtor 2<br>Spouse, if          |                                   | Name                           | Middle                         | Name   | Last Name  |  |  |  |
|                                 | States Bankrupto                  |                                |                                | N DISTRICT   |  |  |  |  |
| into a c                        | nates Bariniapte                  | by Court for                   | uio. Northier                  |  | or orno  |  |  |  |
| ase nu                          | mber                              |                                |                                |  |  |  |  | ☐ Check if this is a<br>amended filing   |
|                                 | al Form 1                         |                                | -                              |  |  |  |  |  |
| cne                             | <u>edule A</u>                    | /B: PI                         | operty                         |  |  |  |  | 12/15  |
| _ `                             | own or have an                    | y legal or eq                  | uitable interest in a          | ny residence,  | , building, land, or similar property?   |  |  |  |
| _                               | Go to Part 2.  . Where is the pro | operty?                        |                                |  |  |  |  |  |
| .1 186                          |                                   | ve.                            | cription                       | ■ Sing   | e property? Check all that apply gle-family home blex or multi-unit building   | the amount o   | f any secured  | nims or exemptions. Put<br>d claims on Schedule D:<br>ns Secured by Property.  |
| Yes1                            | . Where is the pro                | VE.                            |                                | Sing Dup Con Man   | gle-family home blex or multi-unit building adominium or cooperative and actured or mobile home  | the amount o Creditors Wh  | of any secured to Have Clain to the of the   | d claims on Schedule D:<br>ns Secured by Property.  Current value of the   |
| Yes1                            | . Where is the pro                | ve.                            | cription  44313-0000  ZIP Code | Sing Dup Con Man Land  | gle-family home plex or multi-unit building adominium or cooperative aufactured or mobile home d estment property  | Current valuentire prope   | of any secured to Have Clain to the of the   | d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?   |
| Yes.  186 Street                | . Where is the pro                | ve.<br>ele, or other des<br>OH | 44313-0000                     | Sing Dup Con Man Land  | gle-family home olex or multi-unit building adominium or cooperative nufactured or mobile home d estment property eshare   | Current valuentire prope \$95  | f any secured to Have Claim to Have Claim to the rty?  5,620.00                                    | d claims on Schedule D: ns Secured by Property.  Current value of the portion you own? \$95,620.00 our ownership interest                            |
| Yes.  1  186  Street            | . Where is the pro                | ve.<br>ele, or other des<br>OH | 44313-0000                     | Sing Dup Con Man Land Inve Time Othe                                     | gle-family home olex or multi-unit building adominium or cooperative nufactured or mobile home d estment property eshare er un interest in the property? Check one   | Current valuentire prope \$95  Describe the (such as fee a life estate)            | of any secured to Have Claim the of the rty? 5,620.00 enature of your simple, tena, if known.      | d claims on Schedule D: ns Secured by Property.  Current value of the portion you own? \$95,620.00 our ownership interest                            |
| Yes.  186 Street                | . Where is the pro                | ve.<br>ele, or other des<br>OH | 44313-0000                     | Sing Dup Con Man Lane Inve Time Othe Who has a                           | gle-family home olex or multi-unit building adominium or cooperative nufactured or mobile home d estment property eshare er in interest in the property? Check one otor 1 only   | Current valuentire prope \$95  Describe the (such as fee                           | of any secured to Have Claim the of the rty? 5,620.00 enature of your simple, tena, if known.      | d claims on Schedule D: ns Secured by Property.  Current value of the portion you own? \$95,620.00 our ownership interest                            |
| Yes.  186 Street                | . Where is the pro                | ve.<br>ele, or other des<br>OH | 44313-0000                     | Sing Dup Con Man Land Inve Othe Who has a Deb Deb                        | gle-family home olex or multi-unit building adominium or cooperative nufactured or mobile home d estment property eshare er an interest in the property? Check one otor 1 only otor 2 only otor 1 and Debtor 2 only  | Current valuentire prope \$95  Describe the (such as fee a life estate) fee simple | of any secured of Have Clain the of the rty?  of 6,620.00  e nature of you simple, tend, if known. | d claims on Schedule D: ns Secured by Property.  Current value of the portion you own?  \$95,620.00  |
| .1 186 Street                   | . Where is the pro                | ve.<br>ele, or other des<br>OH | 44313-0000                     | Sing Dup Con Man Land Inve Time Othe Who has a Deb Deb At le Other infor | gle-family home olex or multi-unit building adominium or cooperative nufactured or mobile home d estment property eshare er un interest in the property? Check one otor 1 only otor 2 only otor 1 and Debtor 2 only east one of the debtors and another rmation you wish to add about this i | Current valuentire prope \$95  Describe the (such as fee a life estate) fee Simple | f any secured of Have Clain e of the rty? 5,620.00 e nature of your simple, tend, if known.        | d claims on Schedule D: ns Secured by Property.  Current value of the portion you own? \$95,620.00  our ownership interest ancy by the entireties, o |
| Yes.  1.1  186 Street  Akt City | . Where is the pro                | ve.<br>ele, or other des<br>OH | 44313-0000                     | Sing Dup Con Man Lane Inve Time Othe Who has a Deb Deb At le Other infor | gle-family home olex or multi-unit building adominium or cooperative aufactured or mobile home d estment property eshare er un interest in the property? Check one otor 1 only otor 2 only otor 1 and Debtor 2 only east one of the debtors and another                                      | Current valuentire prope \$95  Describe the (such as fee a life estate) fee Simple | f any secured of Have Clain e of the rty? 5,620.00 e nature of your simple, tend, if known.        | Current value of the portion you own? \$95,620.0  our ownership interest ancy by the entireties, o   |

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

| Debte          |                          | k Edward Cunningham  |  | ase number (if known)                                |   |
|----------------|--------------------------|--|--|--|---|
| 3. <b>Ca</b>   | rs, vans, tr             | ucks, tractors, sport utility ve   | hicles, motorcycles  |  |   |
|                | No                       |  |  |  |   |
|                | Yes                      |  |  |  |   |
| 3.1            | -                        | Hyundai  | Who has an interest in the property? Check one   | Do not deduct secured cl<br>the amount of any secure | ed claims on Schedule D:                                      |
|                |                          | Elantra  | Debtor 1 only  | Creditors Who Have Clair                             | ms Secured by Property.                                       |
|                | Year:                    | 2016<br>e mileage: 60000   | Debtor 2 only  | Current value of the entire property?                | Current value of the portion you own?                         |
|                | Other inform             |  | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another   | entire property:                                     | portion you own:  |
|                |                          |  | — / k loads one of the desicle and another   |  |   |
|                |                          |  | ☐ Check if this is community property (see instructions)   | \$8,595.00   | \$8,595.00  |
| 3.2            | Make:                    | Ford   | Who has an interest in the property? Check one   | Do not deduct secured cl                             |   |
| 0.2            |                          | Fusion   | Debtor 1 only  | the amount of any secure<br>Creditors Who Have Clair |   |
|                |                          | 2018   | ☐ Debtor 2 only  |  |   |
|                | Approximat               |  | Debtor 1 and Debtor 2 only   | Current value of the<br>entire property?             | Current value of the portion you own?                         |
|                | Other inform             | <del>-</del>   | ☐ At least one of the debtors and another  |  |   |
|                |                          |  | _  | ¢40.770.00   | 040.770.00  |
|                |                          |  | ☐ Check if this is community property (see instructions)   | \$13,779.00  | \$13,779.00   |
| .pa<br>Part 3  | ges you ha               | ve attached for Part 2. Write  Your Personal and Household Ite               | n for all of your entries from Part 2, including a that number hereems ems terest in any of the following items? |  | \$22,374.00  Current value of the                             |
|                |                          |  |  | j  | portion you own?  Do not deduct secured claims or exemptions. |
| E>             |                          | ods and furnishings<br>njor appliances, furniture, linens                    | , china, kitchenware   |  |   |
|                |                          | misc. used house   | ehold goods and furnishings  |  | \$3,500.00  |
| <i>E</i>       |                          | cluding cell phones, cameras, m  | eo, stereo, and digital equipment; computers, printe<br>nedia players, games                                     | ers, scanners; music collecti                        | ons; electronic devices                                       |
|                |                          | misc. used items   |  |  | \$900.00  |
| E>             | oth<br>No<br>Yes. Descri | tiques and figurines; paintings,<br>ner collections, memorabilia, co<br>ribe |  | t objects; stamp, coin, or ba                        |   |
| <b>Utticis</b> | al Form 106/             | ΛR   | Schedule A/B: Property   |  | page 2  |

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| De  | ebtor 1 Mark Edwar   | d Cunningham Case number (ii  | known)  |
|-----|--|---|---|
| 9.  | Equipment for sports a   | and hobbies ographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; o   | canoes and kayaks; carpentry tools;   |
|     | Yes. Describe  |   |   |
|     |  | miss used sporting goods  | \$300.00  |
|     |  | misc. used sporting goods   |   |
| 10. | Firearms  Examples: Pistols, rifle  No  Yes. Describe  | es, shotguns, ammunition, and related equipment   |   |
| 11. | Clothes  Examples: Everyday c  □ No  ■ Yes. Describe   | elothes, furs, leather coats, designer wear, shoes, accessories   |   |
|     | _ 103. Describe  |   | A4 500 00   |
|     |  | used clothing   | \$1,500.00  |
| 12. | Jewelry  Examples: Everyday je  □ No  ■ Yes. Describe  | ewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches,  | gems, gold, silver  |
|     |  | misc. used jewelry  | \$900.00  |
|     | Non-farm animals  Examples: Dogs, cats,  No  Yes. Describe  Any other personal at  No  Yes. Give specific in | nd household items you did not already list, including any health aids you did no   | t list  |
| 15  |  | of all of your entries from Part 3, including any entries for pages you have attact number here   | \$7,100.00  |
|     | nrt 4: Describe Your Final   |   | Commont value of the  |
| D   | o you own or nave any  | legal or equitable interest in any of the following?  | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | □ No   | have in your wallet, in your home, in a safe deposit box, and on hand when you file yo  | ur petition   |
|     |  | available c   | ash\$7.00   |
| 17. |  | savings, or other financial accounts; certificates of deposit; shares in credit unions, broll. If you have multiple accounts with the same institution, list each.  Institution name: | cerage houses, and other similar  |
|     |  |   |   |

Official Form 106A/B Schedule A/B: Property page 3

| D   | ebtor 1                      | Mark Edward                                     | Cunnin    | gham   |                              | Case number (if known)  |   |
|-----|------------------------------|---|-----------|--|------------------------------|---|---|
|     |                              |   | 17.1.     | savings and checking account   | Fifth Third                  |   | \$150.00  |
| 18. |                              | , <b>mutual funds, o</b><br>bles: Bond funds, i |           | ely traded stocks<br>ent accounts with broker                                | rage firms, money mark       | ket accounts  |   |
|     |                              |   |           | Institution or issuer nan  | ne:                          |   |   |
| 19. | . Non-pu<br>joint ve<br>■ No |   | ck and    | interests in incorporat  | ed and unincorporate         | ed businesses, including an interest in                                 | an LLC, partnership, and                                    |
|     | _                            | Give specific info                              |           | about them<br>me of entity:  |                              | % of ownership:   |   |
| 20. | Negotia                      | able instruments i                              | nclude p  | nds and other negotial<br>personal checks, cashie<br>those you cannot transf | rs' checks, promissory       | notes, and money orders.  |   |
|     | ☐ Yes. 0                     | Give specific infor                             |           | about them<br>uer name:  |                              |   |   |
| 21. |                              | nent or pension a<br>bles: Interests in IF      |           |  | b), thrift savings accou     | nts, or other pension or profit-sharing plan                            | s   |
|     | ■ Yes. I                     | List each account                               |           | ely.<br>of account:  | Institution name:            |   |   |
|     |                              |   | pensi     | on   | OPERS                        |   | \$13,116.00   |
| 22. | Your sh                      |   | deposit   | s you have made so that  |                              | rvice or use from a company<br>s, water), telecommunications companies, | or others   |
|     | ■ No □ Yes                   |   |           |  | Institution name or          | individual:   |   |
| 23. | _                            | ies (A contract for                             | a perio   | dic payment of money to  | o you, either for life or fo | or a number of years)   |   |
|     | ■ No □ Yes                   | lssı  | uer nam   | e and description.   |                              |   |   |
| 24. |                              | s in an education<br>C. §§ 530(b)(1), 52        |           |  | ified ABLE program, o        | or under a qualified state tuition progra                               | m.  |
|     | ☐ Yes                        | Inst  | itution r | name and description. S  | eparately file the record    | ds of any interests.11 U.S.C. § 521(c):                                 |   |
| 25. | ■ No                         | •   |           |  | r than anything listed       | in line 1), and rights or powers exercis                                | able for your benefit                                       |
|     | ☐ Yes.                       | Give specific info                              | rmation   | about them   |                              |   |   |
| 26. |                              |   |           | ss, trade secrets, and c<br>es, websites, proceeds t                         |                              |   |   |
|     | ☐ Yes.                       | Give specific info                              | rmation   | about them   |                              |   |   |
| 27. |                              |   |           | r general intangibles<br>lusive licenses, coopera                            | ntive association holding    | gs, liquor licenses, professional licenses                              |   |
|     |                              | Give specific info                              | rmation   | about them   |                              |   |   |
| M   | oney or p                    | property owed to                                | you?      |  |                              |   | Current value of the portion you own? Do not deduct secured |

Claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 4

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| Debtor 1 Mark Edward Cunningham   | <u> </u>  | Case number (if known)               |                     |
|---|---|--------------------------------------|---------------------|
| 28. <b>Tax refunds owed to you</b> ☐ No   |   |                                      |                     |
| ■ Yes. Give specific information about  | them, including whether you already filed the returns   | and the tax years                    |                     |
|   | possible tax refund monies, prorated for<br>non-filing spouse and for months in yea<br>of filing and for any additional years<br>included in the bankruptcy estate. | ar                                   | Unknown             |
| 29. Family support  Examples: Past due or lump sum alim  No  ☐ Yes. Give specific information   | ony, spousal support, child support, maintenance, di  | vorce settlement, property settler   | nent                |
| 30. Other amounts someone owes you  Examples: Unpaid wages, disability instance benefits; unpaid loans you  ■ No  □ Yes. Give specific information                                  | surance payments, disability benefits, sick pay, vaca<br>made to someone else   | tion pay, workers' compensation      | , Social Security   |
| 31. Interests in insurance policies   |   |                                      | Surrender or refund |
| Company   | Tunio.  | •                                    | value:              |
| life insur  | ance with job - no cash value   |                                      | \$0.00              |
| <ul> <li>32. Any interest in property that is due y If you are the beneficiary of a living tru someone has died.</li> <li>■ No</li> <li>□ Yes. Give specific information</li> </ul> | rou from someone who has died st, expect proceeds from a life insurance policy, or a  | re currently entitled to receive pro | operty because      |
|   | r or not you have filed a lawsuit or made a deman<br>putes, insurance claims, or rights to sue  | nd for payment                       |                     |
| 34. Other contingent and unliquidated c ■ No □ Yes. Describe each claim   | laims of every nature, including counterclaims o  | f the debtor and rights to set of    | f claims            |
| 35. Any financial assets you did not alre  ■ No □ Yes. Give specific information  | ady list  |                                      |                     |
|   | ntries from Part 4, including any entries for page  |                                      | \$13,273.00         |
| Part 5: Describe Any Business-Related Prop  | perty You Own or Have an Interest In. List any real estat   | e in Part 1.                         |                     |
| 37. Do you own or have any legal or equitable  No. Go to Part 6.  | interest in any business-related property?  |                                      |                     |
| Yes Go to line 38   |   |                                      |                     |

Official Form 106A/B Schedule A/B: Property page 5

| Deb   | tor 1 Mark Edward Cunningham  |                        | Case number (if known)       |              |
|-------|---|------------------------|------------------------------|--------------|
| Part  | 6: Describe Any Farm- and Commercial Fishing-Related Property You lif you own or have an interest in farmland, list it in Part 1. | Own or Have an Interes | it In.                       |              |
| 46. I | Do you own or have any legal or equitable interest in any farm-   | or commercial fishin   | g-related property?          |              |
|       | No. Go to Part 7.   |                        |                              |              |
|       | Yes. Go to line 47.   |                        |                              |              |
| Part  | 7: Describe All Property You Own or Have an Interest in That You  | u Did Not List Above   |                              |              |
| _     | Do you have other property of any kind you did not already list<br>Examples: Season tickets, country club membership              | ?                      |                              |              |
|       | No  |                        |                              |              |
| L     | Yes. Give specific information  |                        |                              |              |
| 54.   | Add the dollar value of all of your entries from Part 7. Write th   | at number here         |                              | \$0.00       |
| Part  | 8: List the Totals of Each Part of this Form  |                        |                              |              |
| 55.   | Part 1: Total real estate, line 2   |                        |                              | \$95,620.00  |
| 56.   | Part 2: Total vehicles, line 5  | \$22,374.00            |                              |              |
| 57.   | Part 3: Total personal and household items, line 15   | \$7,100.00             |                              |              |
| 58.   | Part 4: Total financial assets, line 36   | \$13,273.00            |                              |              |
| 59.   | Part 5: Total business-related property, line 45  | \$0.00                 |                              |              |
| 60.   | Part 6: Total farm- and fishing-related property, line 52   | \$0.00                 |                              |              |
| 61.   | Part 7: Total other property not listed, line 54 +  | \$0.00                 |                              |              |
| 62.   | Total personal property. Add lines 56 through 61  | \$42,747.00            | Copy personal property total | \$42,747.00  |
| 63.   | Total of all property on Schedule A/B. Add line 55 + line 62  |                        |                              | \$138,367.00 |

Official Form 106A/B Schedule A/B: Property page 6

| Fill in this information to identify your case: |                          |                   |           |   |                                      |   |  |
|---|--------------------------|-------------------|-----------|---|--------------------------------------|---|--|
| Debtor 1  | Mark Edward Cuni         | ningham           |           |   |                                      |   |  |
|   | First Name               | Middle Name       | Last Name |   |                                      |   |  |
| Debtor 2  |                          |                   |           |   |                                      |   |  |
| (Spouse if, filing)                             | First Name               | Middle Name       | Last Name | _ |                                      |   |  |
| United States Ba                                | inkruptcy Court for the: | NORTHERN DISTRICT | OF OHIO   |   |                                      |   |  |
| Case number _                                   |                          |                   |           |   | ☐ Check if this is an amended filing | 1 |  |

## Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| Brief description of the property and line on<br>Schedule A/B that lists this property | Current value of the portion you own | Amo  | unt of the exemption you claim                                  | Specific laws that allow exemption        |  |
|--|--------------------------------------|------|---|---|--|
|  | Copy the value from<br>Schedule A/B  | Chec | ck only one box for each exemption.                             |   |  |
| 1866 Kingsley Ave. Akron, OH 44313<br>Summit County                                    | \$95,620.00                          |      | \$145,000.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(1)    |  |
| legal desc./PIN: 6844455<br>Line from <i>Schedule A/B</i> : 1.1                        |                                      |      | 100% of fair market value, up to any applicable statutory limit | 2020.00(1)(1)                             |  |
| 2016 Hyundai Elantra 60000 miles<br>Line from Schedule A/B: 3.1                        | \$8,595.00                           |      | \$4,000.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(2)    |  |
| Elle Holl Goldade 775. C. I  |                                      |      | 100% of fair market value, up to any applicable statutory limit | 2020.00(1)(2)                             |  |
| misc. used household goods and furnishings   | \$3,500.00                           |      | \$3,500.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(4)(a) |  |
| Line from Schedule A/B: 6.1  |                                      |      | 100% of fair market value, up to any applicable statutory limit | ( )( )( )                                 |  |
| misc. used items Line from Schedule A/B: 7.1   | \$900.00                             |      | \$900.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(4)(a) |  |
| Line Holli Garedale 745. 7.1   |                                      |      | 100% of fair market value, up to any applicable statutory limit | 2323.00(1)(4)(a)                          |  |
| misc. used sporting goods  | \$300.00                             |      | \$300.00  | Ohio Rev. Code Ann. §<br>2329.66(A)(4)(a) |  |
| End nom concease / V.B. 3.1  |                                      |      | 100% of fair market value, up to any applicable statutory limit | 2020.00(1)(1)(d)                          |  |

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

| description of the property and line on   |  |   |  |  |  |
|---|--|---|--|--|--|
| description of the property and line on dule A/B that lists this property                 | portion you own  |   | ount of the exemption you claim  | Specific laws that allow exemption   |  |
|   | Schedule A/B   | Cne   | eck only one box for each exemption.   |  |  |
|   | \$1,500.00   |   | \$1,500.00   | Ohio Rev. Code Ann. §<br>2329.66(A)(4)(a)  |  |
|   |  |   | 100% of fair market value, up to any applicable statutory limit                | · / / / /  |  |
|   | \$900.00   |   | \$900.00   | Ohio Rev. Code Ann. § 2329.66(A)(4)(b)   |  |
|   |  |   | 100% of fair market value, up to any applicable statutory limit                | 2020.00(**)(**)(**)  |  |
|   | \$7.00   |   | \$7.00   | Ohio Rev. Code Ann. § 2329.66(A)(3)  |  |
|   |  |   | 100% of fair market value, up to any applicable statutory limit                |  |  |
|   | \$150.00   |   | 75%  | Ohio Rev. Code Ann. § 2329.66(A)(13)   |  |
| <del></del>   |  |   | 100% of fair market value, up to any applicable statutory limit                | 2020.00((1)(10)  |  |
|   | \$150.00   |   | \$37.50  | Ohio Rev. Code Ann. § 2329.66(A)(3)  |  |
|   |  |   | 100% of fair market value, up to any applicable statutory limit                | 2020.00((1)(0)   |  |
|   | \$13,116.00  |   | 100%   | Ohio Rev. Code Ann. §<br>2329.66(A)(10)(c)   |  |
|   |  |   | 100% of fair market value, up to any applicable statutory limit                | 2020100(11)(110)(10)   |  |
|   | Unknown  |   | \$1,325.00   | Ohio Rev. Code Ann. §<br>2329.66(A)(18)  |  |
| ing and for any additional years uded in the bankruptcy estate.                           |  |   | 100% of fair market value, up to any applicable statutory limit                | 2020.00((1)(10)  |  |
|   | Unknown  |   | Unknown  | Ohio Rev. Code Ann.<br>§2329.66(A)(9)(g)   |  |
| ing and for any additional years uded in the bankruptcy estate.                           |  |   | 100% of fair market value, up to any applicable statutory limit                | 32020.00(/ f)(0)(g)  |  |
| ject to adjustment on 4/01/22 and every 3 No Yes. Did you acquire the property covere  No | Byears after that for ca   | ises fi   | •  | ,  |  |
|   | d clothing from Schedule A/B: 11.1  c. used jewelry from Schedule A/B: 12.1  lable cash from Schedule A/B: 16.1  Ings and checking account: Fifth d from Schedule A/B: 17.1  Ings and checking account: Fifth d from Schedule A/B: 17.1  Ings and checking account: Fifth d from Schedule A/B: 17.1  Sion: OPERS from Schedule A/B: 21.1  Sible tax refund monies, prorated for filling spouse and for months in year ing and for any additional years uded in the bankruptcy estate. From Schedule A/B: 28.1  Sible tax refund monies, prorated for filling spouse and for months in year ing and for any additional years uded in the bankruptcy estate. From Schedule A/B: 28.1  Sible tax refund monies, prorated for filling spouse and for months in year ing and for any additional years uded in the bankruptcy estate. From Schedule A/B: 28.1  Syou claiming a homestead exemption of ject to adjustment on 4/01/22 and every 3 No  Yes. Did you acquire the property covered. | d clothing from Schedule A/B: 11.1  c. used jewelry from Schedule A/B: 12.1  spool on Schedule A/B: 12.1  c. used jewelry from Schedule A/B: 12.1  lable cash from Schedule A/B: 16.1  sngs and checking account: Fifth from Schedule A/B: 17.1  ngs and checking account: Fifth from Schedule A/B: 17.1  sion: OPERS from Schedule A/B: 21.1  sible tax refund monies, prorated for filling spouse and for months in year ing and for any additional years used in the bankruptcy estate. from Schedule A/B: 28.1  sible tax refund monies, prorated for filling spouse and for months in year ing and for any additional years used in the bankruptcy estate. from Schedule A/B: 28.1  you claiming a homestead exemption of more than \$170,35 ject to adjustment on 4/01/22 and every 3 years after that for can No  Yes. Did you acquire the property covered by the exemption with the property covered by the e | delule A/B that lists this property    Copy the value from Schedule A/B   11.1 | Copy the value from   Copy the value from   Check only one box for each exemption. |  |

Official Form 106C

Schedule C: The Property You Claim as Exempt

| Fill in this information to identify you           | ur case:  |                            |  |                                   |
|--|---|----------------------------|--|-----------------------------------|
| Debtor 1 Mark Edward Cu                            | ınningham   |                            |  |                                   |
| First Name   | Middle Name Last Na   | ime                        | -  |                                   |
| Debtor 2   |   |                            | _  |                                   |
| (Spouse if, filing) First Name                     | Middle Name Last Na   | ime                        |  |                                   |
| United States Bankruptcy Court for the             | : NORTHERN DISTRICT OF OHIO   |                            |  |                                   |
|  |   |                            | -  |                                   |
| Case number  |   |                            |  |                                   |
| (if known)   |   |                            | _  | if this is an                     |
|  |   |                            | ameno  | ded filing                        |
| Official Form 106D                                 |   |                            |  |                                   |
|  |   |                            | _  |                                   |
| Schedule D: Creditors                              | s Who Have Claims Secu  | ared by Proper             | ty   | 12/15                             |
|  | If two married people are filing together, both out, number the entries, and attach it to this fo   |                            |  |                                   |
| 1. Do any creditors have claims secured b          | y your property?  |                            |  |                                   |
|  | this form to the court with your other schedu   | les. You have nothing else | to report on this form.                                |                                   |
| _  | •   | 2.2 2. 2                   |  |                                   |
| Yes. Fill in all of the information                | below.  |                            |  |                                   |
| Part 1: List All Secured Claims                    |   | Calumn A                   | Calumn B   | Caluman                           |
|  | more than one secured claim, list the creditor seps a particular claim, list the other creditors in Part ical order according to the creditor's name. |                            | Column B  Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2.1 Ford Motor Credit                              | Describe the property that secures the claim  |                            | \$13,779.00  | \$15,700.00                       |
| Creditor's Name                                    | 2018 Ford Fusion 2000 miles   |                            | · ·  |                                   |
|  |   |                            |  |                                   |
| P.o. Box 219686                                    | As of the date you file, the claim is: Check all  | that                       |  |                                   |
| Kansas City, MO                                    | apply.  | ınaı                       |  |                                   |
| 64121-9686   | ☐ Contingent  |                            |  |                                   |
| Number, Street, City, State & Zip Code             | ☐ Unliquidated  |                            |  |                                   |
|  | ☐ Disputed  |                            |  |                                   |
| Who owes the debt? Check one.                      | Nature of lien. Check all that apply.   |                            |  |                                   |
| ■ Debtor 1 only                                    | An agreement you made (such as mortgage   | e or secured               |  |                                   |
| Debtor 2 only                                      | car loan)   |                            |  |                                   |
| ☐ Debtor 1 and Debtor 2 only                       | ☐ Statutory lien (such as tax lien, mechanic's  | lien)                      |  |                                   |
| lacksquare At least one of the debtors and another | ☐ Judgment lien from a lawsuit  |                            |  |                                   |
| ☐ Check if this claim relates to a                 | Other (including a right to offset)   |                            |  |                                   |
| community debt                                     |   |                            |  |                                   |
| Date debt was incurred 2018                        | Last 4 digits of account number   | 289                        |  |                                   |
| 2.2 Mr. Cooper                                     | Describe the property that secures the clain  | n: \$115,865.00            | \$95,620.00  | \$20,245.00                       |
| Creditor's Name                                    | 1866 Kingsley Ave. Akron, OH 44313  |                            |  |                                   |
|  | Summit County   |                            |  |                                   |
|  | legal desc./PIN: 6844455  |                            |  |                                   |
| 8950 Cypress Waters Blvd.                          | As of the date you file, the claim is: Check all  | that                       |  |                                   |
| Coppell, TX 75019                                  | apply.  Contingent  |                            |  |                                   |
| Number, Street, City, State & Zip Code             | ☐ Unliquidated  |                            |  |                                   |
|  | ☐ Disputed  |                            |  |                                   |
| Who owes the debt? Check one.                      | Nature of lien. Check all that apply.   |                            |  |                                   |
| Debtor 1 only                                      | ■ An agreement you made (such as mortgage   | e or secured               |  |                                   |
| Debtor 2 only                                      | car loan)   |                            |  |                                   |
| Debtor 1 and Debtor 2 only                         | ☐ Statutory lien (such as tax lien, mechanic's  | ien)                       |  |                                   |
| ☐ At least one of the debtors and another          | ☐ Judgment lien from a lawsuit  | - /                        |  |                                   |
| ☐ Check if this claim relates to a                 | ☐ Other (including a right to offset)   |                            |  |                                   |
| community debt                                     |   |                            |  |                                   |
| Date debt was incurred 2004                        | Last 4 digits of account number 1   | 289                        |  |                                   |
| Date dest was incurred ZUUT                        | Last - argits or account number   |                            |  |                                   |

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

page 1 of 2

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| Debtor 1 Mark Edward Cunningha                                     |  | Case number (if known) |                |        |  |  |  |  |
|--|--|------------------------|----------------|--------|--|--|--|--|
| First Name Middle N  | lame Last Name   |                        |                |        |  |  |  |  |
| 2.3 TD Auto Finance  | Describe the property that secures the claim:                            | \$5,789.00             | \$8,595.00     | \$0.00 |  |  |  |  |
| Creditor's Name  | 2016 Hyundai Elantra 60000 miles   |                        |                |        |  |  |  |  |
| PO Box 9223<br>Farmington, MI 48333                                | As of the date you file, the claim is: Check all that apply.  Contingent |                        |                |        |  |  |  |  |
| Number, Street, City, State & Zip Code                             | Unliquidated   |                        |                |        |  |  |  |  |
| Who owes the debt? Check one.                                      | ☐ Disputed  Nature of lien. Check all that apply.                        |                        |                |        |  |  |  |  |
| ■ Debtor 1 only □ Debtor 2 only                                    | An agreement you made (such as mortgage or s<br>car loan)                | secured                |                |        |  |  |  |  |
| ☐ Debtor 1 and Debtor 2 only                                       | ☐ Statutory lien (such as tax lien, mechanic's lien)                     |                        |                |        |  |  |  |  |
| ☐ At least one of the debtors and another                          | ☐ Judgment lien from a lawsuit   |                        |                |        |  |  |  |  |
| ☐ Check if this claim relates to a community debt                  | Other (including a right to offset)                                      |                        |                |        |  |  |  |  |
| Date debt was incurred   | Last 4 digits of account number  | )                      |                |        |  |  |  |  |
|  |  |                        |                |        |  |  |  |  |
| Add the dollar value of your entries in C                          | Column A on this page. Write that number here:                           | \$151,133.00           | ้              |        |  |  |  |  |
| If this is the last page of your form, add Write that number here: | the dollar value totals from all pages.                                  | \$151,133.00           | $\overline{o}$ |        |  |  |  |  |

### Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Official Form 106D

Additional Page of Schedule D: Creditors Who Have Claims Secured by Property

page 2 of 2

| Fill in t  | his information to identify your c  | ase:  |   |   |
|--|---|---|---|---|
| Debtor   | 1 Mark Edward Cunn  | ingham  |   |   |
| 20210.   | First Name  | Middle Name   | Last Name   | -   |
| Debtor   |   |   |   | _   |
| (Spouse i  | f, filing) First Name   | Middle Name   | Last Name   |   |
| United   | States Bankruptcy Court for the:  | NORTHERN DISTRICT   | OF OHIO   | _   |
| Case n   | umber   |   |   |   |
| (if known)   |   |   |   | ☐ Check if this is an   |
|  |   |   |   | amended filing  |
| Sche<br>Be as co<br>any exec<br>Schedule<br>Schedule | eutory contracts or unexpired leases to<br>e G: Executory Contracts and Unexpi<br>e D: Creditors Who Have Claims Secu | e Part 1 for creditors with Pl<br>that could result in a claim.<br>red Leases (Official Form 10<br>tred by Property. If more sp | RIORITY claims and Part 2 for creditors with<br>Also list executory contracts on Schedule A<br>06G). Do not include any creditors with parti-<br>ace is needed, copy the Part you need, fill it | VB: Property (Official Form 106A/B) and on<br>ally secured claims that are listed in<br>out, number the entries in the boxes on the |
|  | d case number (if known).   | •   | n to report in a Part, do not file that Part. On  | the top of any additional pages, write your   |
| 1. Do  | any creditors have priority unsecured   | claims against you?   |   |   |
|  | No. Go to Part 2.   |   |   |   |
|  |   |   |   |   |
| Part 2:  |   | / Unsecured Claims  |   |   |
| 3. Do  | any creditors have nonpriority unsec  | ured claims against you?  |   |   |
|  | No. You have nothing to report in this pa   | ort. Submit this form to the cou  | urt with your other schedules   |   |
| _  |   | int. Oubline this form to the cot   | it with your other schedules.   |   |
| •  | Yes.  |   |   |   |
| uns  | ecured claim, list the creditor separately none creditor holds a particular claim, lis                                | for each claim. For each clair  | er of the creditor who holds each claim. If a conflicted, identify what type of claim it is. Do not I flyou have more than three nonpriority unsecured.   | ist claims already included in Part 1. If more  |
|  | · <del>-</del>  |   |   | Total claim   |
| 4.1  | Buckeye State Credit Union  | Last 4 digits   | of account number 1289  | Unknown   |
|  | Nonpriority Creditor's Name 197 East Thornton Street  | When was th   | e debt incurred?  |   |
|  | Akron, OH 44311   |   |   |   |
|  | Number Street City State Zip Code  Who incurred the debt? Check one.  | As of the dat   | e you file, the claim is: Check all that apply  |   |
|  | _   | П.  |   |   |
|  | Debtor 1 only   | ☐ Continger   |   |   |
|  | Debtor 2 only   | ☐ Unliquidat  | ed  |   |
|  | Debtor 1 and Debtor 2 only  | ☐ Disputed  | DDIODITY  |   |
|  | At least one of the debtors and ano   |   | PRIORITY unsecured claim:   |   |
|  | ☐ Check if this claim is for a comm   |   |   |   |
|  | Is the claim subject to offset?   | ☐ Obligation report as prio   | s arising out of a separation agreement or divor  | ce that you did not   |
|  | ■ No  |   | pension or profit-sharing plans, and other similar  | debts   |
|  | □ Yes   | •   | osify Other   |   |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 4

| Debto | r 1 Mark Edward Cunningham  | Case number (if known)  |            |  |  |  |
|-------|---|---|------------|--|--|--|
| 4.2   | Capital One Nonpriority Creditor's Name PO Box 98873                                      | Last 4 digits of account number 1289  When was the debt incurred?   | \$380.00   |  |  |  |
|       | Las Vegas, NV 89193  Number Street City State Zip Code  Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply   |            |  |  |  |
|       | Debtor 1 only   | ☐ Contingent  |            |  |  |  |
|       | Debtor 2 only   | ☐ Unliquidated  |            |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another                    | ☐ Disputed  Type of NONPRIORITY unsecured claim:  |            |  |  |  |
|       | ☐ Check if this claim is for a community  | Student loans   |            |  |  |  |
|       | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |  |  |
|       | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |            |  |  |  |
|       | Yes   | ■ Other. Specify credit card  |            |  |  |  |
| 4.3   | Goodyear/CBNA Nonpriority Creditor's Name   | Last 4 digits of account number 1289  | \$1,433.00 |  |  |  |
|       | POB 6497  | When was the debt incurred?   |            |  |  |  |
|       | Sioux Falls, SD 57117  Number Street City State Zip Code                                  | As of the date you file, the claim is: Check all that apply   |            |  |  |  |
|       | Who incurred the debt? Check one.   |   |            |  |  |  |
|       | ■ Debtor 1 only   | ☐ Contingent  |            |  |  |  |
|       | Debtor 2 only   | ☐ Unliquidated  |            |  |  |  |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |  |  |  |
|       | $\square$ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |
|       | ☐ Check if this claim is for a community  | Student loans   |            |  |  |  |
|       | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |  |  |
|       | ■ No  | $\square$ Debts to pension or profit-sharing plans, and other similar debts                               |            |  |  |  |
|       | Yes   | ■ Other. Specify credit card  |            |  |  |  |
| 4.4   | Macys/DSNB<br>Nonpriority Creditor's Name   | Last 4 digits of account number 1289  | \$482.00   |  |  |  |
|       | 9111 Duke Blvd.<br>Mason, OH 45040  | When was the debt incurred?   |            |  |  |  |
|       | Number Street City State Zip Code   | As of the date you file, the claim is: Check all that apply   |            |  |  |  |
|       | Who incurred the debt? Check one.   |   |            |  |  |  |
|       | ■ Debtor 1 only   | ☐ Contingent  |            |  |  |  |
|       | Debtor 2 only   | ☐ Unliquidated  |            |  |  |  |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed  |            |  |  |  |
|       | ☐ At least one of the debtors and another   | Type of NONPRIORITY unsecured claim:  |            |  |  |  |
|       | ☐ Check if this claim is for a community  |   |            |  |  |  |
|       | debt Is the claim subject to offset?  | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims |            |  |  |  |
|       | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                       |            |  |  |  |
|       | Yes   | ■ Other. Specify credit card  |            |  |  |  |
|       |   |   |            |  |  |  |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 4

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| Debto | nr 1 Mark Edward Cunningham   | Case number (if known)   |            |
|-------|---|--|------------|
| 4.5   | One Main Financial Nonpriority Creditor's Name                      | Last 4 digits of account number 1289   | \$3,459.00 |
|       | POB 183172<br>Columbus, OH 43218                                    | When was the debt incurred?  |            |
|       | Number Street City State Zip Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply  |            |
|       | Debtor 1 only   | ☐ Contingent   |            |
|       | Debtor 2 only   | ☐ Unliquidated   |            |
|       | ☐ Debtor 1 and Debtor 2 only  | ☐ Disputed   |            |
|       | ☐ At least one of the debtors and another                           | Type of NONPRIORITY unsecured claim:   |            |
|       | $\square$ Check if this claim is for a community                    | ☐ Student loans  |            |
|       | debt<br>Is the claim subject to offset?                             | Dobligations arising out of a separation agreement or divorce that you did not report as priority claims |            |
|       | ■ No  | lacktriangle Debts to pension or profit-sharing plans, and other similar debts                           |            |
|       | Yes   | Other. Specify other   |            |
| 4.6   | Sears Card Nonpriority Creditor's Name                              | Last 4 digits of account number 1289   | \$5,091.00 |
|       | Citi Cards  | When was the debt incurred?  |            |
|       | 8725 W. Sahara Avenue   |  |            |
|       | The Lakes, NV 89163-0001  Number Street City State Zip Code         | As of the date you file, the claim is: Check all that apply  |            |
|       | Who incurred the debt? Check one.                                   | As of the date you me, the dam is. Oneck an that apply   |            |
|       | ■ Debtor 1 only   | ☐ Contingent   |            |
|       | Debtor 2 only   | ☐ Unliquidated   |            |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed   |            |
|       | ☐ At least one of the debtors and another                           | Type of NONPRIORITY unsecured claim:   |            |
|       | ☐ Check if this claim is for a community                            | ☐ Student loans  |            |
|       | debt Is the claim subject to offset?                                | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |            |
|       | ■ No  | ☐ Debts to pension or profit-sharing plans, and other similar debts                                      |            |
|       | ☐ Yes   | ■ Other. Specify _ credit card   |            |
| 4.7   | SYNCB/Walmart   | Last 4 digits of account number 1289   | \$5,270.00 |
|       | Nonpriority Creditor's Name PO BOX 965024                           | When was the debt incurred?  |            |
|       | Orlando, FL 32896  Number Street City State Zip Code                | As of the date you file, the claim is: Check all that apply  |            |
|       | Who incurred the debt? Check one.                                   | no or the date you me, the stall be one of an tract appropries   |            |
|       | Debtor 1 only   | ☐ Contingent   |            |
|       | Debtor 2 only   | □ Unliquidated   |            |
|       | Debtor 1 and Debtor 2 only  | ☐ Disputed   |            |
|       | ☐ At least one of the debtors and another                           | Type of NONPRIORITY unsecured claim:   |            |
|       | ☐ Check if this claim is for a community                            | ☐ Student loans  |            |
|       | debt Is the claim subject to offset?                                | Obligations arising out of a separation agreement or divorce that you did not report as priority claims  |            |
|       | ■ No  | Debts to pension or profit-sharing plans, and other similar debts  |            |
|       | Yes   | ■ Other. Specify credit card   |            |
|       |   | -1 7   |            |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 4

| TD Auto Finance                           | Last 4 digits of account number 1289  | \$5,818.00 |
|---|---|------------|
| Nonpriority Creditor's Name               | <del></del>   |            |
| PO Box 9223                               | When was the debt incurred?   |            |
| Farmington, MI 48333                      |   |            |
| Number Street City State Zip Code         | As of the date you file, the claim is: Check all that apply                     |            |
| Who incurred the debt? Check one.         |   |            |
| ■ Debtor 1 only                           | ☐ Contingent  |            |
| Debtor 2 only                             | ☐ Unliquidated  |            |
| ☐ Debtor 1 and Debtor 2 only              | ☐ Disputed  |            |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim:  |            |
| ☐ Check if this claim is for a community  | ☐ Student loans   |            |
| debt                                      | ☐ Obligations arising out of a separation agreement or divorce that you did not |            |
| Is the claim subject to offset?           | report as priority claims   |            |
| ■ No                                      | Debts to pension or profit-sharing plans, and other similar debts               |            |
| □Yes                                      | ■ Other. Specify auto loan  |            |

#### Part 3: List Others to Be Notified About a Debt That You Already Listed

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

#### Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

|              |     |   |     | 7  | Total Claim |
|--------------|-----|---|-----|----|-------------|
|              | 6a. | Domestic support obligations  | 6a. | \$ | 0.00        |
| Total claims |     |   |     |    |             |
| from Part 1  | 6b. | Taxes and certain other debts you owe the government  | 6b. | \$ | 0.00        |
|              | 6c. | Claims for death or personal injury while you were intoxicated  | 6c. | \$ | 0.00        |
|              | 6d. | Other. Add all other priority unsecured claims. Write that amount here.                                 | 6d. | \$ | 0.00        |
|              | 6e. | Total Priority. Add lines 6a through 6d.  | 6e. | \$ | 0.00        |
|              |     |   |     | 7  | Total Claim |
|              | 6f. | Student loans   | 6f. | \$ | 0.00        |
| Total claims |     |   |     |    |             |
| from Part 2  | 6g. | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | 6g. | \$ | 0.00        |
|              | 6h. |   | 6h. | \$ | 0.00        |
|              | 6i. | <b>Other.</b> Add all other nonpriority unsecured claims. Write that amount here.                       | 6i. | \$ | 21,933.00   |
|              | 6j. | Total Nonpriority. Add lines 6f through 6i.   | 6j. | \$ | 21,933.00   |

Official Form 106 E/F

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 4

| Fill in this infor     | mation to identify your  | case:             |           |  |                       |  |  |  |  |
|------------------------|--------------------------|-------------------|-----------|--|-----------------------|--|--|--|--|
| Debtor 1               | 1 Mark Edward Cunningham |                   |           |  |                       |  |  |  |  |
|                        | First Name               | Middle Name       | Last Name |  |                       |  |  |  |  |
| Debtor 2               |                          |                   |           |  |                       |  |  |  |  |
| (Spouse if, filing)    | First Name               | Middle Name       | Last Name |  |                       |  |  |  |  |
| United States Ba       | ankruptcy Court for the: | NORTHERN DISTRICT | OF OHIO   |  |                       |  |  |  |  |
| Case number (if known) |                          |                   |           |  | ☐ Check if this is an |  |  |  |  |
|                        |                          |                   |           |  | amended filing        |  |  |  |  |

## Official Form 106G

# **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

|     | Person or | company with<br>Name, Number | whom you have the street, City, State and ZIF | e contract or lease | State what the contract or lease is for |
|-----|-----------|------------------------------|---|---------------------|---|
| 2.1 |           |                              |   |                     |   |
|     | Name      |                              |   |                     |   |
|     | Number    | Street                       |   |                     |   |
|     | City      |                              | State   | ZIP Code            | _                                       |
| 2.2 |           |                              |   |                     |   |
|     | Name      |                              |   |                     |   |
|     | Number    | Street                       |   |                     | <u> </u>                                |
|     | City      |                              | State   | ZIP Code            | _                                       |
| 2.3 |           |                              |   |                     |   |
|     | Name      |                              |   |                     |   |
|     | Number    | Street                       |   |                     |   |
|     | City      |                              | State   | ZIP Code            | <del>_</del>                            |
| 2.4 | ,         |                              |   |                     |   |
|     | Name      |                              |   |                     |   |
|     | Number    | Street                       |   |                     | _                                       |
|     | City      |                              | State   | ZIP Code            | _                                       |
| 2.5 | -         |                              |   |                     |   |
|     | Name      |                              |   |                     |   |
|     | Number    | Street                       |   |                     | <u> </u>                                |
|     | City      |                              | State   | ZIP Code            | <del>_</del>                            |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

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| Fill in this                | s information to identify your                                       | case:  |                               |  |
|-----------------------------|--|--|-------------------------------|--|
| Debtor 1                    | Mark Edward Cuni<br>First Name                                       | ningham<br>Middle Name                           | Last Name                     |  |
| Debtor 2<br>(Spouse if, fil | ling) First Name   | Middle Name                                      | Last Name                     |  |
| United Sta                  | ates Bankruptcy Court for the:                                       | NORTHERN DISTRICT                                | OF OHIO                       |  |
| Case num                    | nber   |  |                               | ☐ Check if this is an amended filing   |
| Officia                     | al Form 106H   |  |                               |  |
| Sched                       | dule H: Your Cod   | ebtors   |                               | 12/15  |
| fill it out, a              |  | boxes on the left. Attack. Answer every question | n the Additional Page t<br>i. | ion. If more space is needed, copy the Additional Page, o this page. On the top of any Additional Pages, write as a codebtor.  |
| ■ No                        |  |  |                               |  |
|                             | thin the last 8 years, have you<br>na, California, Idaho, Louisiana, |  |                               | y? (Community property states and territories include ington, and Wisconsin.)  |
|                             | o. Go to line 3.<br>s. Did your spouse, former spou                  | use, or legal equivalent liv                     | e with you at the time?       |  |
| in line<br>Form             | e 2 again as a codebtor only i                                       | f that person is a guarar                        | ntor or cosigner. Make        | if your spouse is filing with you. List the person shown<br>sure you have listed the creditor on Schedule D (Official<br>16G). Use Schedule D, Schedule E/F, or Schedule G to fill |
|                             | Column 1: Your codebtor<br>Name, Number, Street, City, State and ZI  | P Code   |                               | Column 2: The creditor to whom you owe the debt Check all schedules that apply:  |
| 3.1                         | Name   |  |                               | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line  |
|                             | Number Street<br>City  | State  | ZIP Code                      | _  |
| 3.2                         | Name   |  |                               | ☐ Schedule D, line ☐ Schedule E/F, line ☐ Schedule G, line ☐ Schedule G, line  |
|                             | Number Street<br>City  | State  | ZIP Code                      | _  |

|                           |  |  |  |                         |                | •  |                               |                             |                 |
|---------------------------|--|--|--|-------------------------|----------------|--|-------------------------------|-----------------------------|-----------------|
| Fill                      | in this information to identify your   | case:  |  |                         |                |  |                               |                             |                 |
| Del                       | btor 1 Mark Edwa   | ard Cunningham   |  |                         |                |  |                               |                             |                 |
|                           | btor 2<br>puse, if filing)   |  |  |                         |                |  |                               |                             |                 |
| Uni                       | ited States Bankruptcy Court for t   | he: NORTHERN DISTRI  | CT OF OHIO                                 |                         | _              |  |                               |                             |                 |
| (If kr                    | se number  |  | -  |                         |                | Check if this is  An amende  A supplem 13 income | ed filing                     |                             | chapter         |
|                           | fficial Form 106l  |  |  |                         |                | MM / DD/ Y                                       | YYYY                          |                             |                 |
|                           | chedule I: Your In   |  |  |                         |                |  |                               |                             | 12/15           |
| sup<br>spo<br>atta<br>Par | as complete and accurate as population of plying correct information. If you are separated and you a separate sheet to this formation.  The describe Employment of the place o | ou are married and not fili<br>our spouse is not filing w<br>n. On the top of any additi | ng jointly, and you<br>ith you, do not inc | ır spouse<br>lude infor | is liv<br>mati | ring with you, incl<br>on about your sp          | ude informa<br>ouse. If mor   | ation about<br>e space is i | your<br>needed, |
| 1.                        | Fill in your employment information.   |  |  | Debtor 1                |                |  | Debtor 2 or non-filing spouse |                             |                 |
|                           | If you have more than one job,   | Employment status  | ■ Employed                                 | ■ Employed              |                |  | oyed                          |                             |                 |
|                           | attach a separate page with information about additional employers.  |  | ☐ Not employed                             | ☐ Not employed          |                |  | ☐ Not employed                |                             |                 |
|                           |  | Occupation   | bus operator                               |                         |                |  |                               |                             |                 |
|                           | Include part-time, seasonal, or self-employed work.  | Employer's name  | Metro RTA                                  |                         |                |  |                               |                             |                 |
|                           | Occupation may include studer or homemaker, if it applies.   | t Employer's address   | 416 Kenmore<br>Akron, OH 443               |                         |                |  |                               |                             |                 |
|                           |  | How long employed t  | here? 3 yea                                | rs                      |                |  |                               |                             |                 |
| Pai                       | rt 2: Give Details About M   | onthly Income  |  |                         |                |  |                               |                             |                 |
|                           | mate monthly income as of the use unless you are separated.  | date you file this form. If  | you have nothing to                        | o report for            | any            | line, write \$0 in the                           | space. Inclu                  | ıde your nor                | n-filing        |
| -                         | ou or your non-filing spouse have<br>e space, attach a separate sheet  |  | ombine the informa                         | tion for all            | empl           | oyers for that perso                             | on on the line                | es below. If y              | you need        |
|                           |  |  |  |                         |                | For Debtor 1                                     | For Debt                      | or 2 or<br>g spouse         |                 |
| 2.                        | List monthly gross wages, sa deductions). If not paid monthly  |  |  | 2.                      | \$             | 3,522.00   | \$                            | N/A                         |                 |
| 3.                        | Estimate and list monthly over   | ertime pay.  |  | 3.                      | +\$            | 0.00   | +\$                           | N/A                         |                 |
| 4.                        | Calculate gross Income. Add  | line 2 + line 3.   |  | 4.                      | \$             | 3.522.00   | \$                            | N/A                         |                 |

|     |   |   |         | For    | Debtor 1      |             | Debtor 2 or<br>-filing spouse |
|-----|---|---|---------|--------|---------------|-------------|-------------------------------|
|     | Copy  | y line 4 here   | 4.      | \$     | 3,522.00      | \$          | N/A                           |
| 5.  | List  | all payroll deductions:   |         |        |               |             |                               |
|     | 5a.   | Tax, Medicare, and Social Security deductions   | 5a.     | \$     | 460.00        | \$          | N/A                           |
|     | 5b.   | Mandatory contributions for retirement plans  | 5b.     | \$_    | 352.00        | \$_         | N/A                           |
|     | 5c.   | Voluntary contributions for retirement plans  | 5c.     | \$_    | 0.00          | \$          | N/A                           |
|     | 5d.   | Required repayments of retirement fund loans  | 5d.     | \$     | 0.00          | \$          | N/A                           |
|     | 5e.   | Insurance   | 5e.     | \$     | 26.00         | \$          | N/A                           |
|     | 5f.   | Domestic support obligations  | 5f.     | \$     | 0.00          | \$          | N/A                           |
|     | 5g.   | Union dues  | 5g.     | \$     | 0.00          | \$          | N/A                           |
|     | 5h.   | Other deductions. Specify:  | _ 5h.+  | \$     | 0.00          | + \$        | N/A                           |
| 6.  | Add   | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.  | 6.      | \$_    | 838.00        | \$_         | N/A                           |
| 7.  | Calc  | ulate total monthly take-home pay. Subtract line 6 from line 4.   | 7.      | \$     | 2,684.00      | \$          | N/A                           |
| 8.  | List a  | all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a.     | \$     | 0.00          | \$          | N/A                           |
|     | 8b.   | Interest and dividends  | 8b.     | \$     | 0.00          | \$          | N/A                           |
|     | 8c.   | Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.  | 8c.     | \$     | 0.00          | \$          | N/A                           |
|     | 8d.   | Unemployment compensation   | 8d.     | \$_    | 0.00          | <u>\$</u> — | N/A                           |
|     | 8e.   | Social Security   | 8e.     | \$     | 0.00          | \$          | N/A                           |
|     | 8f.   | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:          | 8f.     | \$     | 0.00          | \$          | N/A                           |
|     | 8g.   | Pension or retirement income  | <br>8g. | \$     | 0.00          | \$          | N/A                           |
|     | 8h.   | Other monthly income. Specify: VA   | _ 8h.+  | \$     | 140.00        | + \$        | N/A                           |
| 9.  | Add   | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.  | 9.      | \$     | 140.00        | \$          | N/A                           |
| 10  | Calc  | ulate monthly income. Add line 7 + line 9.  | 10. \$  |        | 2,824.00 + \$ |             | N/A = \$ 2,824.00             |
|     |   | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.  | Ψ       |        | _,32 1.30     |             | 2,024.00                      |
| 11. | 1. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:  11. +\$ 0.00 |   |         |        |               |             |                               |
| 12. |   | the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certaines  |         |        |               |             | 12. \$ 2,824.00 Combined      |
| 13. | Do y  | ou expect an increase or decrease within the year after you file this form'   | ?       |        |               |             | monthly income                |
|     |   | Yes. Explain: no expected changes within the year following the fil   | ing of  | this c | ase.          |             |                               |

Official Form 106l Schedule I: Your Income page 2

| Fill       | in this information to identify your case:  |                     |                                   |           |          |                    |                               |   |
|------------|---|---------------------|-----------------------------------|-----------|----------|--------------------|-------------------------------|---|
|            | otor 1 Mark Edward Cunningham   |                     |                                   | Ch        | eck if t | hie ie:            |                               |   |
|            | Wark Edward Curringham  |                     |                                   |           |          | mended filing      |                               |   |
|            | otor 2  |                     |                                   |           |          |                    | ving postpetition chapter     |   |
| (Spo       | ouse, if filing)  |                     |                                   |           | 13 e     | xpenses as or      | the following date:           |   |
| Unit       | ted States Bankruptcy Court for the: NORTHERN DISTRICT OF   | OHIO                |                                   |           | MM .     | DD / YYYY          |                               |   |
| !          | nown)   |                     |                                   |           |          |                    |                               |   |
| Of         | fficial Form 106J   |                     |                                   |           |          |                    |                               |   |
| So         | chedule J: Your Expenses  |                     |                                   |           |          |                    | 12/1                          | 5 |
| Be<br>info | as complete and accurate as possible. If two married peormation. If more space is needed, attach another sheet to mber (if known). Answer every question. |                     |                                   |           |          |                    |                               |   |
| Par<br>1.  | t 1: Describe Your Household Is this a joint case?  |                     |                                   |           |          |                    |                               | _ |
|            | ■ No. Go to line 2.   |                     |                                   |           |          |                    |                               |   |
|            | ☐ Yes. <b>Does Debtor 2 live in a separate household?</b> ☐ No  |                     |                                   |           |          |                    |                               |   |
|            | ☐ Yes. Debtor 2 must file Official Form 106J-2, Ex  | penses for Separa   | ate Household                     | of De     | ebtor 2. |                    |                               |   |
| 2.         | Do you have dependents? ☐ No  |                     |                                   |           |          |                    |                               |   |
|            | Do not list Debtor 1 and Debtor 2. Fill out this information each dependent   |                     | ent's relationsl<br>I or Debtor 2 | nip to    |          | Dependent's<br>ige | Does dependent live with you? |   |
|            | Do not state the  |                     |                                   |           |          |                    | □ No                          |   |
|            | dependents names.   | Son                 |                                   |           |          | 14                 | ■ Yes                         |   |
|            |   | Con                 |                                   |           |          | 16                 | No                            |   |
|            |   | Son                 |                                   |           |          |                    | ☐ Yes<br>☐ No                 |   |
|            |   |                     |                                   |           |          |                    | ☐ Yes                         |   |
|            |   |                     |                                   |           |          |                    | □ No                          |   |
| 2          | De veux expenses include  |                     |                                   |           |          |                    | ☐ Yes                         |   |
| 3.         | Do your expenses include expenses of people other than yourself and your dependents?  |                     |                                   |           |          |                    |                               |   |
|            | t 2: Estimate Your Ongoing Monthly Expenses   |                     |                                   |           |          |                    |                               |   |
| exp        | timate your expenses as of your bankruptcy filing date un<br>benses as of a date after the bankruptcy is filed. If this is<br>blicable date.              |                     |                                   |           |          |                    |                               |   |
|            | lude expenses paid for with non-cash government assisted value of such assistance and have included it on Sched   |                     |                                   |           |          |                    |                               |   |
| (Off       | ficial Form 106l.)  |                     |                                   |           | _        | Your expe          | enses                         |   |
| 4.         | The rental or home ownership expenses for your residence payments and any rent for the ground or lot.   | ence. Include first | mortgage                          | 4.        | \$       |                    | 999.00                        |   |
|            | If not included in line 4:  |                     |                                   |           |          |                    |                               |   |
|            | 4a. Real estate taxes   |                     |                                   | 4a.       | \$       |                    | 0.00                          |   |
|            | 4b. Property, homeowner's, or renter's insurance  |                     |                                   | 4b.       | \$       |                    | 0.00                          |   |
|            | Home maintenance, repair, and upkeep expenses     Homeowner's association or condominium dues   |                     |                                   | 4c.       | : —      |                    | 50.00                         |   |
| 5.         | <ul> <li>4d. Homeowner's association or condominium dues</li> <li>Additional mortgage payments for your residence, sucl</li> </ul>                        | n as home equity    | loans                             | 4d.<br>5. |          |                    | 0.00                          |   |

| Fill in this inform             | ation to identify you                       | r case:                   |               |                       |                |   |      |
|---------------------------------|---|---------------------------|---------------|-----------------------|----------------|---|------|
| Debtor 1                        | Mark Edward Cu                              |                           |               |                       |                |   |      |
|                                 | First Name                                  | Middle Name               | Last          | Name                  |                |   |      |
| Debtor 2<br>(Spouse if, filing) | First Name                                  | Middle Name               | Last          | Name                  |                |   |      |
| United States Ban               | kruptcy Court for the:                      | NORTHERN DISTRIC          | CT OF OHIO    |                       |                |   |      |
| Case number                     |   |                           |               |                       |                | ☐ Check if this is an   |      |
| (a rarearry                     |   |                           |               |                       |                | amended filing  |      |
| Official Form  Declarati        |   | an Individua              | l Debto       | or's Sched            | lules          | 1   | 2/15 |
| If two married peo              | ple are filing togeth                       | er, both are equally resp | onsible for s | upplying correct info | ormation.      |   |      |
| obtaining money of              |   | in connection with a ba   |               |                       |                | ement, concealing property,<br>00, or imprisonment for up to        |      |
| Sign                            | Below                                       |                           |               |                       |                |   |      |
| Did you pay                     | or agree to pay som                         | eone who is NOT an atto   | orney to help | you fill out bankrup  | tcy forms?     |   |      |
| ■ No                            |   |                           |               |                       |                |   |      |
| ☐ Yes. Na                       | ame of person                               |                           |               |                       |                | nkruptcy Petition Preparer's Not<br>n, and Signature (Official Form |      |
|                                 | y of perjury, I declar<br>true and correct. | e that I have read the su | mmary and se  | chedules filed with t | this declarati | on and  |      |
| X /s/ Mark                      | Edward Cunningha                            | am                        | Х             |                       |                |   |      |
| Mark Ed                         | ward Cunningham<br>of Debtor 1              |                           |               | Signature of Debtor   | 2              |   |      |
| Date Ap                         | oril 16, 2019                               |                           |               | Date                  |                |   |      |

Official Form 106Dec

**Declaration About an Individual Debtor's Schedules** 

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| Fill in | this inform        | nation to identify you                     | r case:  |   |  |   |
|---------|--------------------|--|--|---|--|---|
| Debtor  | 1                  | Mark Edward Cui                            |  | LastName  |  |   |
| Debtor  | . 2                | First Name                                 | Middle Name  | Last Name   |  |   |
| (Spouse |                    | First Name                                 | Middle Name  | Last Name   |  |   |
| United  | States Bar         | kruptcy Court for the:                     | NORTHERN DISTRICT (  | OF OHIO   |  |   |
| Case n  | number             |  |  |   |  | Check if this is an<br>mended filing                  |
| State   | ement              |  | Affairs for Individ  |   |  | 4/19  |
| informa | ation. If m        |  | attach a separate sheet to   |   | equally responsible for sup<br>additional pages, write you     |   |
| Part 1: | Give D             | etails About Your Ma                       | arital Status and Where You  | Lived Before  |  |   |
| 1. WI   | hat is your        | current marital statu                      | ıs?  |   |  |   |
|         | Married<br>Not mar | ried                                       |  |   |  |   |
| 2. Du   | ıring the la       | ıst 3 years, have you                      | lived anywhere other than  | where you live now?                                   |  |   |
|         | No<br>Yes. Lis     | t all of the places you l                  | ived in the last 3 years. Do no  | ot include where you live now                         | <i>.</i>   |   |
| D       | ebtor 1 Pri        | or Address:                                | Dates Debtor 1 lived there   | Debtor 2 Prior Ac                                     | dress:   | Dates Debtor 2<br>lived there                         |
|         |                    |  |  |   | ity property state or territory<br>co, Texas, Washington and W |   |
|         |                    | •  | hedule H: Your Codebtors (Of   | fficial Form 106H).                                   |  |   |
| Part 2  | Explai             | n the Sources of You                       | r Income   |   |  |   |
| Fill    | I in the tota      | I amount of income yo                      | nployment or from operatin<br>u received from all jobs and a<br>have income that you receive | all businesses, including part                        |  | ndar years?   |
| ■       | No<br>Yes. Fill    | in the details.                            |  |   |  |   |
|         |                    |  | Debtor 1   |   | Debtor 2   |   |
|         |                    |  | Sources of income<br>Check all that apply.   | Gross income<br>(before deductions and<br>exclusions) | Sources of income<br>Check all that apply.                     | Gross income<br>(before deductions<br>and exclusions) |
|         | •                  | of current year until<br>d for bankruptcy: | ■ Wages, commissions, bonuses, tips  | \$12,280.00   | ☐ Wages, commissions, bonuses, tips                            |   |
|         |                    |  | ☐ Operating a business   |   | ☐ Operating a business   |   |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

Best Case Bankruptcy

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|   | Debtor 1  |  | Debtor 2  |   |
|---|---|--|---|---|
|   |   |  |   |   |
|   | Sources of income<br>Check all that apply.  | Gross income<br>(before deductions and<br>exclusions)  | Sources of income<br>Check all that apply.                          | Gross income<br>(before deductions<br>and exclusions)                         |
| For last calendar year:<br>January 1 to December 31, 2018)  | ■ Wages, commissions, bonuses, tips   | \$62,853.00  | ☐ Wages, commissions, bonuses, tips                                 |   |
|   | ☐ Operating a business  |  | ☐ Operating a business  |   |
| For the calendar year before that:<br>January 1 to December 31, 2017)   | ■ Wages, commissions, bonuses, tips   | \$36,349.00  | ☐ Wages, commissions, bonuses, tips                                 |   |
|   | ☐ Operating a business  |  | ☐ Operating a business  |   |
| For the calendar year:<br>(January 1 to December 31, 2016 )   | ■ Wages, commissions, bonuses, tips   | \$33,436.00  | ☐ Wages, commissions, bonuses, tips                                 |   |
|   | ☐ Operating a business  |  | ☐ Operating a business  |   |
| Yes. Fill in the details.   | Debtor 1  |  | Debtor 2  |   |
|   |   |  |   |   |
|   | Sources of income Describe below.   | Gross income from each source  | Sources of income<br>Describe below.                                | Gross income (before deductions   |
|   |   |  |   |   |
|   |   | each source (before deductions and   |   | (before deductions  |
| he date you filed for bankruptcy:  For last calendar year:  | Describe below.   | each source<br>(before deductions and<br>exclusions)   |   | (before deductions  |
| For last calendar year:  January 1 to December 31, 2018)  For the calendar year before that:  | Describe below.  Pensions/Annuities   | each source<br>(before deductions and<br>exclusions)<br>\$420.00   |   | (before deductions  |
| For the calendar year before that: (January 1 to December 31, 2018)  For the calendar year before that: (January 1 to December 31, 2017)  | Pensions/Annuities  Pensions/Annuities  | each source<br>(before deductions and<br>exclusions)<br>\$420.00   |   | (before deductions  |
| The date you filed for bankruptcy:  For last calendar year:  January 1 to December 31, 2018)  For the calendar year before that:  January 1 to December 31, 2017)  For the calendar year:  January 1 to December 31, 2016)  Part 3: List Certain Payments You  Are either Debtor 1's or Debtor 2'  No. Neither Debtor 1 nor D   | Pensions/Annuities  Pensions/Annuities  Pensions/Annuities  Pensions/Annuities  Made Before You Filed for I   | each source (before deductions and exclusions) \$420.00 \$1,680.00 \$1,680.00 \$1,680.00   | Describe below.   | (before deductions and exclusions)  |
| For last calendar year: (January 1 to December 31, 2018)  For the calendar year before that: (January 1 to December 31, 2017)  For the calendar year: (January 1 to December 31, 2016)  Part 3: List Certain Payments You  . Are either Debtor 1's or Debtor 2'  □ No. Neither Debtor 1 nor Dindividual primarily for a  During the 90 days beforung the | Pensions/Annuities  Pensions/Annuities  Pensions/Annuities  Pensions/Annuities  Pensions/Annuities  Made Before You Filed for It is debts primarily consumer bettor 2 has primarily consumer personal, family, or household one you filed for bankruptcy, diese | each source (before deductions and exclusions) \$420.00 \$1,680.00 \$1,680.00 \$1,680.00  Bankruptcy debts? Imer debts. Consumer debts d purpose."   | Describe below.   | (before deductions and exclusions)  |
| Are either Debtor 1's or Debtor 2'  No. Neither Debtor 1 nor Dindividual primarily for a  During the 90 days beforundent No. Go to line 7  Yes List below en paid that cree   | Pensions/Annuities  Pensions/Annuities  Pensions/Annuities  Pensions/Annuities  Pensions/Annuities  Made Before You Filed for It is debts primarily consumer bettor 2 has primarily consumer personal, family, or household one you filed for bankruptcy, diese | each source (before deductions and exclusions) \$420.00 \$1,680.00 \$1,680.00 \$1,680.00  Sankruptcy debts? Imer debts. Consumer debts d purpose." d you pay any creditor a total d a total of \$6,825* or more interest for domestic support obligations. | Describe below.  are defined in 11 U.S.C. § 10 of \$6,825* or more? | (before deduction and exclusions)  01(8) as "incurred by the total amount you |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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Official Form 107

Best Case Bankruptcy

page 3

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case number (if known)

Official Form 107

Debtor 1

Mark Edward Cunningham

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 4

| sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  Nome of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Last 4 digits of account or instrument account or code, sold, or transferred  Last 4 digits of account or instrument account or transferred  Last 4 digits of account or instrument account or transferred  Date account was closed, sold, or transferred  Last balance of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to It? Address (Number, Street, City, State and ZIP Code)  Who else has or had access Describe the contents  Do you still have It?  Address (Number, Street, City, State and ZIP Code)  Ves. Fill in the details.  Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.   | 18. | Within 2 years before you filed for bankruptc transferred in the ordinary course of your bu Include both outright transfers and transfers mad include gifts and transfers that you have already  No | siness or financial affa<br>de as security (such as the | i <b>irs?</b><br>he granting of a s |                           |                   |  |
|--|-----|---|---|-------------------------------------|---------------------------|-------------------|--|
| Address   Person's relationship to you   Person's relationship |     | ☐ Yes. Fill in the details.   |   |                                     |                           |                   |  |
| Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)    No  |     |   |   |                                     | payments received         |                   |  |
| beneficiary? (These are often called asset-protection devices.)  Name of trust  Description and value of the property transferred made  Part 32.  List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes, Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  Name of Storage Facility  Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes, Fill in the details.  No Yes, Fill in the details.  Do you still have it?  Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it?  Address (Number, Street, City, State and ZIP Code)  Describe the contents  Do you still have it?  Address (Number, Street, City, State and ZIP Code)  Part 32.  Identify Property You Hold or Control for Someone Else  Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes, Fill in the details.  Owner's Name Address (Number, Street, City, State and |     | Person's relationship to you  |   |                                     |                           |                   |  |
| Yes, Fill in the details.   Name of trust   Description and value of the property transferred   Date Transfer wa made  | 19. | beneficiary? (These are often called asset-prot   |   | y property to a s                   | self-settled trust or sim | ilar device of wh | nich you are a                               |
| Name of trust  Description and value of the property transferred  Date Transfer wa made  Part 8:  List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units  Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts: certificates of deposit; shares in banks, credit unions, brokerage include checking, savings, money market, or other financial institutions.  No  Ves. Fill in the details.  Name of Financial Institution and Address (humber, Street, City, State and ZIP Code)  Address (humber, Street, City, State and ZIP Code)  No  Ves. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  No  Ves. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No  Ves. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No  Ves. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No  Ves. Fill in the details.  No  Pert 9:  Identify Property You Hold or Control for Someone Else  Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No  Ves. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  No  Ves. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  No  Ves. Fill in the details.  |     | _   |   |                                     |                           |                   |  |
| 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information   |     |   | Description and v                                       | alue of the prop                    | erty transferred          |                   |  |
| 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  Who else had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information   | Por | t 9. List of Cartain Financial Associate Inst   | rumanta Safa Danasit                                    | Payes and Sta                       | raga Unita                |                   |  |
| Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.  No Yes. Fill in the details.  Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)  Last 4 digits of account or instrument closed, sold, moved, or transferred creating or transferred.  Last 4 digits of account or instrument closed, sold, moved, or transferred creating or transferred.  Last balance closed, sold, moved, or transferred creating or transferred.  Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Where is the property? (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information  | Par | List of Certain Financial Accounts, inst  | ruments, sare Deposit                                   | boxes, and Sto                      | rage Units                |                   |  |
| Yes. Fill in the details. Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)   Address (Number, Street, City, State and ZIP Code)   Account number   Type of account or instrument   Date account was closed, sold, moved, or transferred   Type of account number   Type of account or closed, sold, moved, or transferred   Type of account number   Type of account or closed, sold, moved, or transferred   Type of account number   Type of account or closed, sold, moved, or transferred   Type of account number   Type of account or closed, sold, moved, or transferred   Type of account or closed, sold, moved, or transferred   Type of account or closed, sold, moved, or transferred   Type of account or closed, sold, moved, or transferred   Type of account or closed, sold, moved, or transferred   Type of account or closed, sold, moved, or transferred   Type of account or closed, sold, moved, or transferred   Type of account or closed, sold, moved, or transferred   Type of account or closed, sold, moved, or transferred   Type of account or closed, sold, moved, or transferred   Type of account or closed, sold, moved, or transferred   Type of account or closed, sold, moved, or transferred   Type of account or transferred   Type of transferred   Type of account or transferred   Type    | 20. | sold, moved, or transferred?<br>Include checking, savings, money market, or<br>houses, pension funds, cooperatives, associ  | other financial accoun                                  | nts; certificates (                 | of deposit; shares in ba  |                   |  |
| Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)    Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)   Last 4 digits of account number   Type of account or instrument   Date account was closed, sold, moved, or transferred   Type of account or instrument   Date account was closed, sold, or transferred   Type of account or instrument   Date account was closed, sold, or transferred   Type of account or instrument   Date account was closed, sold, which is the close of transferred   Date account was closed, sold, or transferred   Type of account or instrument   Date account was closed, sold, which is the closed of transferred   Date account was closed, sold, which is the closed of transferred   Date account was closed, sold, or transferred   Date account was closed, sold, which is the closed of transferred   Date account was closed, sold, or transferred   Date account was closed, or transferred   Date account  |     | _   |   |                                     |                           |                   |  |
| Address (Number, Street, City, State and ZIP   account number   instrument   closed, sold, moved, or transferred   transferred   closed, sold, moved, or transferred   closed, clo |     | Yes. Fill in the details.   |   |                                     |                           |                   |  |
| acash, or other valuables?  No Yes. Fill in the details.  Name of Financial Institution Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  No Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information  |     | Address (Number, Street, City, State and ZIP  | •   | • •                                 | closed, sold moved, or    |                   | Last balance<br>efore closing or<br>transfer |
| Name of Financial Institution Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  To you still have it?  Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Code)  Part 10: Give Details About Environmental Information  | 21. | cash, or other valuables?  No   | ear before you filed for                                | bankruptcy, any                     | y safe deposit box or o   | ther depository   | for securities,                              |
| Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  Address (Number, Street, City, State and ZIP Code)  No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Value  Part 10: Give Details About Environmental Information  |     | Yes. Fill in the details.   |   |                                     |                           |                   |  |
| No Yes. Fill in the details.  Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information   |     |   | Address (Number, St                                     |                                     | Describe the contents     |                   |  |
| ☐ Yes. Fill in the details.         Name of Storage Facility       Who else has or had access to it?       Describe the contents       Do you still have it?         Address (Number, Street, City, State and ZIP Code)       Address (Number, Street, City, State and ZIP Code)       Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.         ☐ No       Yes. Fill in the details.         Owner's Name Address (Number, Street, City, State and ZIP Code)       Where is the property? (Number, Street, City, State and ZIP Code)       Describe the property       Valuation         Part 10: Give Details About Environmental Information   | 22. | Have you stored property in a storage unit or   | place other than your                                   | home within 1 y                     | ear before you filed fo   | r bankruptcy?     |  |
| Name of Storage Facility Address (Number, Street, City, State and ZIP Code)  Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)  Do you still have it?  Address (Number, Street, City, State and ZIP Code)  Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information  |     | _   |   |                                     |                           |                   |  |
| Address (Number, Street, City, State and ZIP Code)  to it? Address (Number, Street, City, State and ZIP Code)  Part 9: Identify Property You Hold or Control for Someone Else  23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information   |     | ☐ Yes. Fill in the details.   |   |                                     |                           |                   |  |
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Value  Part 10: Give Details About Environmental Information   |     | ·   | to it?<br>Address (Number, St                           |                                     | Describe the contents     |                   | •  |
| 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.  No Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Where is the property? (Number, Street, City, State and ZIP Code)  Value  Part 10: Give Details About Environmental Information   | Par | t 9: Identify Property You Hold or Control f  | or Someone Else   |                                     |                           |                   |  |
| ☐ Yes. Fill in the details.  Owner's Name Address (Number, Street, City, State and ZIP Code)  Part 10: Give Details About Environmental Information  Where is the property? (Number, Street, City, State and ZIP Code)  Code)  Describe the property Value  Value  Output  Describe the property   | 23. | Do you hold or control any property that som  |   | ıde any property                    | you borrowed from, a      | re storing for, o | r hold in trust                              |
| Address (Number, Street, City, State and ZIP Code)  (Number, Street, City, State and ZIP Code)  Part 10:  Give Details About Environmental Information   |     | _   |   |                                     |                           |                   |  |
|  |     |   | (Number, Street, City, St                               |                                     | Describe the property     |                   | Value  |
|  | Par | t 10: Give Details About Environmental Info   | rmation   |                                     |                           |                   |  |
| Parkana a  |     |   |   |                                     |                           |                   |  |

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Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and Address (Number, Street, City, State and ZIP Code) know it ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Environmental law, if you Date of notice Governmental unit Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) ZIP Code) 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ■ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

(Number, Street, City, State and ZIP Code)

Part 12: Sign Below

Nο

Name Address

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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**Date Issued** 

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☐ Yes. Fill in the details below.

| Debtor 1 Mark Edward C                          | unningham   | Case number (if known)  |
|---|---|---|
|   |   | ing property, or obtaining money or property by fraud in connection |
| 18 U.S.C. §§ 152, 1341, 1519                    | result in fines up to \$250,000, or imprisonme<br>, and 3571. | it for up to 20 years, or both.                                     |
| /s/ Mark Edward Cunningl                        | nam   |   |
| Mark Edward Cunninghan<br>Signature of Debtor 1 | Signature of De   | btor 2  |
| <b>Date</b> April 16, 2019                      | Date  |   |
| Did you attach additional pa<br>■ No<br>□ Yes   | ges to Your Statement of Financial Affairs fo                 | r Individuals Filing for Bankruptcy (Official Form 107)?            |
| Did you pay or agree to pay ■ No                | someone who is not an attorney to help you                    | fill out bankruptcy forms?  |

☐ Yes. Name of Person \_\_\_\_\_. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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| ill in this inforrebtor 1  | Mark Edward Cun  | ningham  |  |  |                                |
|--|--|--|--|--|--------------------------------|
|  | First Name   | Middle Name  | Last Name  | _  |                                |
| ebtor 2<br>pouse if, filing)   | First Name   | Middle Name  | Last Name  | _  |                                |
| nited States Ba  | nkruptcy Court for the:  | NORTHERN DIS   | TRICT OF OHIO  |  |                                |
| ase number   |  |  |  | _  |                                |
| known)   |  |  |  | _  | eck if this is an ended filing |
| official Fo  |  | ( l l l  | dan Eller Herberton Ober   | <b> </b>   |                                |
|  | It Of Intention  ividual filing under cha  |  | /iduals Filing Under Cha   | apter /  | 12/15                          |
|  | e claims secured by yo   |  | · · · · · · · · · · · · · · · · · · ·  |  |                                |
| ou must file thi   | ver is earlier, unless th  | vithin 30 days after   | not expired.<br>you file your bankruptcy petition or by the c<br>ne time for cause. You must also send copies  |  |                                |
|  | eople are filing togethe   | r in a joint case, bo  | oth are equally responsible for supplying cor  | rrect information. Bo                                  | th debtors must                |
| -  |  |  |  |  |                                |
| as complete a  | and accurate as possib   | ole. If more space is  | s needed, attach a separate sheet to this for  | m. On the top of any                                   | additional pages.              |
|  | and accurate as possib<br>our name and case nui  |  | s needed, attach a separate sheet to this for  | m. On the top of any                                   | additional pages,              |
| write ye   |  | mber (if known).   | s needed, attach a separate sheet to this for  | m. On the top of any                                   | additional pages,              |
| write you  | our name and case nui  | mber (if known).   | s needed, attach a separate sheet to this for  |  |                                |
| write your art 1: List Your Error any credite information be   | our name and case nui<br>our Creditors Who Hav<br>ors that you listed in P   | mber (if known).  e Secured Claims  art 1 of Schedule D  |  | roperty (Official Forn                                 |                                |
| write your art 1: List Your Error any credite information be Identify the cre  | our name and case nui<br>our Creditors Who Hav<br>ors that you listed in P<br>elow.  | mber (if known).  e Secured Claims  art 1 of Schedule D  | D: Creditors Who Have Claims Secured by Pr<br>What do you intend to do with the proper<br>secures a debt?  | roperty (Official Forn<br>ty that Did you<br>as exem   | n 106D), fill in the           |
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| For any credition of the creditor's For ame:  Description of   | our name and case number our Creditors Who Have ors that you listed in Pelow. editor and the property to ord Motor Credit  2018 Ford Fusion 2  | mber (if known). e Secured Claims art 1 of Schedule D hat is collateral                                      | D: Creditors Who Have Claims Secured by Pr What do you intend to do with the proper secures a debt?  Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.  | roperty (Official Forn ity that Did you as exem        | n 106D), fill in the           |
| For any credite information be Identify the cre  Creditor's F name:  Description of property securing debt:  | our name and case number our Creditors Who Have ors that you listed in Pelow. editor and the property to ord Motor Credit  2018 Ford Fusion 2  | mber (if known). e Secured Claims art 1 of Schedule D hat is collateral                                      | D: Creditors Who Have Claims Secured by Pr What do you intend to do with the proper secures a debt?  Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement.  | roperty (Official Forn ity that Did you as exem        | n 106D), fill in the           |
| For any credite information be Identify the cre  Creditor's F name:  Description of property securing debt:  | our name and case number our Creditors Who Have ors that you listed in Pelow. editor and the property to ord Motor Credit  2018 Ford Fusion 2  | mber (if known). e Secured Claims art 1 of Schedule D hat is collateral                                      | D: Creditors Who Have Claims Secured by Pr What do you intend to do with the proper secures a debt?  □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: ■ Surrender the property. □ Retain the property and redeem it.  | roperty (Official Form ty that Did you as exem  No Yes | n 106D), fill in the           |
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| write your art 1: List  | our name and case number of the court of the | mber (if known).  e Secured Claims art 1 of Schedule D that is collateral  2000 miles  Akron, OH unty        | D: Creditors Who Have Claims Secured by Pr What do you intend to do with the proper secures a debt?  □ Surrender the property. □ Retain the property and redeem it. ■ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: ■ Surrender the property. □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement.  | roperty (Official Form ty that Did you as exem  No Yes | n 106D), fill in the           |
| rite yeart 1: List Your For any creditor information be Identify the creditor's Formation of property securing debt:  Creditor's Moname:  Description of property securing debt:   | our name and case number of the court of the | mber (if known).  e Secured Claims art 1 of Schedule D that is collateral  2000 miles  Akron, OH unty        | D: Creditors Who Have Claims Secured by Pr What do you intend to do with the proper secures a debt?  Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:  Surrender the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: | roperty (Official Form ty that Did you as exem  No Yes | n 106D), fill in the           |
| rite your art 1: List Y | our name and case number of the court of the | mber (if known).  e Secured Claims art 1 of Schedule D that is collateral  2000 miles  Akron, OH unty 444455 | D: Creditors Who Have Claims Secured by Pr What do you intend to do with the proper secures a debt?  Surrender the property. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:  Surrender the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]:                            | roperty (Official Form                                 | n 106D), fill in the           |

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Best Case Bankruptcy

| Debtor 1 Mark Edward Cunningham                 | Case number (if known)  |
|---|---|
| securing debt:                                  |   |
|   | s<br>ed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), f<br>Unexpired leases are leases that are still in effect; the lease period has not yet endec |
|   | if the trustee does not assume it. 11 U.S.C. § 365(p)(2).   |
| escribe your unexpired personal property leases | Will the lease be assumed?  |
| essor's name:                                   | □ No  |
| escription of leased roperty:                   | ☐ Yes   |
| essor's name:                                   | □ No  |
| escription of leased<br>roperty:                | ☐ Yes   |
| essor's name:                                   | □ No  |
| escription of leased<br>roperty:                | ☐ Yes   |
| essor's name:                                   | □ No  |
| escription of leased roperty:                   | ☐ Yes   |
| essor's name:                                   | □ No  |
| escription of leased roperty:                   | ☐ Yes   |
| essor's name:                                   | □ No  |
| escription of leased roperty:                   | ☐ Yes   |
| essor's name:                                   | □ No  |
| escription of leased roperty:                   | ☐ Yes   |
| art 3: Sign Below                               |   |
| <del></del>                                     | my intention about any property of my estate that secures a debt and any personal   |
| / /s/ Mark Edward Cunningham                    | X   |
| Mark Edward Cunningham Signature of Debtor 1    | Signature of Debtor 2   |
| Date April 16, 2019                             | Date  |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Best Case Bankruptcy

| Fill i                           | n this information to identify your case:  |                              |                             | Ch                                       | eck on              | e box only as d     | rected in this form and  | in Form                       |
|----------------------------------|--|------------------------------|-----------------------------|--|---------------------|---------------------|--|-------------------------------|
| Deb                              | tor 1 Mark Edward Cunningham   |                              |                             | 123                                      | 2A-1Sι              | ipp:                |  |                               |
|                                  | tor 2  |                              |                             |  | ■ 1. T              | here is no presi    | umption of abuse   |                               |
|                                  | ed States Bankruptcy Court for the: Northern District of   | Ohio                         |                             |  | á                   | applies will be m   | o determine if a presum<br>nade under <i>Chapter 7 N</i><br>cial Form 122A-2). |                               |
| (if kno                          | e number<br>   |                              |                             |  | □ 3. T              | he Means Test       | does not apply now be  |                               |
|                                  |  |                              |                             |  | ☐ Ch                | eck if this is a    | n amended filing   |                               |
| Off                              | icial Form 122A - 1  |                              |                             |  |                     |                     | · ·  |                               |
| Ch                               | apter 7 Statement of Your Cur  | ren                          | t Mor                       | nthly Inc                                | om                  | е                   |  | 12/15                         |
| attacl<br>case<br>qualif<br>Part |  | nich th<br>a pres<br>ion fro | e addition sumption         | nal information a<br>of abuse becau      | applies.<br>se you  | On the top of ar    | ny additional pages, write<br>narily consumer debts or                         | your name and because of      |
| 1.                               | What is your marital and filing status? Check one onl  | y.                           |                             |  |                     |                     |  |                               |
|                                  | Not married. Fill out Column A, lines 2-11.  |                              |                             |  |                     |                     |  |                               |
|                                  | ☐ Married and your spouse is filing with you. Fill out   |                              |                             |  | 2-11.               |                     |  |                               |
|                                  | Married and your spouse is NOT filing with you. Y  |                              | •                           | •  |                     |                     |  |                               |
|                                  | Living in the same household and are not legal   | ly sep                       | arated.                     | Fill out both Co                         | lumns               | A and B, lines 2    | 2-11.  |                               |
|                                  | Living separately or are legally separated. Fill o<br>penalty of perjury that you and your spouse are le<br>living apart for reasons that do not include evading   | gally s                      | separated                   | l under nonban                           | kruptc              | y law that applie   | es or that you and your  |                               |
| 10<br>th                         | Il in the average monthly income that you received from all s<br>01(10A). For example, if you are filing on September 15, the 6-months, add the income for all 6 months and divide the total brouses own the same rental property, put the income from that property.  | nth pe                       | riod would<br>II in the res | be March 1 thros<br>sult. Do not include | ugh Aug<br>de any i | just 31. If the amo | unt of your monthly incom-<br>ore than once. For example                       | e varied during<br>e, if both |
|                                  |  |                              |                             |  | Colum               |                     | Column B Debtor 2 or non-filing spouse   |                               |
| 2.                               | Your gross wages, salary, tips, bonuses, overtime, a payroll deductions).  | nd co                        | mmissio                     | ons (before all                          | \$                  | 3,522.00            | \$   |                               |
| 3.                               | <b>Alimony and maintenance payments.</b> Do not include a Column B is filled in.   | ayme                         | ents from                   | a spouse if                              | \$                  | 0.00                | \$   |                               |
| 4.                               | All amounts from any source which are regularly paid you or your dependents, including child support. from an unmarried partner, members of your household, and roommates. Include regular contributions from a specific of the page 1997 of the pag | Includ<br>your               | e regular<br>dependei       | contributions<br>nts, parents,           | \$                  | 0.00                | \$   |                               |
| 5                                | filled in. Do not include payments you listed on line 3.  Net income from operating a business, profession, of   | r farn                       | n                           |  | Ψ                   |                     | Ψ  |                               |
| 0.                               | , recently the second of the s |                              |                             | tor 1                                    |                     |                     |  |                               |
|                                  | Gross receipts (before all deductions)   | \$                           | 0.00                        |  |                     |                     |  |                               |
|                                  | Ordinary and necessary operating expenses  | <b>-</b> \$ _                | 0.00                        |  |                     |                     |  |                               |
|                                  | Net monthly income from a business, profession, or farm  | ı\$_                         | 0.00                        | Copy here ->                             | \$                  | 0.00                | \$   |                               |
| 6.                               | Net income from rental and other real property   |                              |                             |  |                     |                     |  |                               |
|                                  |  | ¢.                           |                             | tor 1                                    |                     |                     |  |                               |
|                                  | Gross receipts (before all deductions)   | \$<br>-\$                    | 0.00                        |  |                     |                     |  |                               |
|                                  | Ordinary and necessary operating expenses  | · —                          |                             | Copy here ->                             | \$                  | 0.00                | \$   |                               |
|                                  | Net monthly income from rental or other real property  | \$_                          | 0.00                        | Coby Hele ->                             | Ψ                   | 0.00                | ¥  |                               |

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

0.00

page 1

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7. Interest, dividends, and royalties

Debtor 1

|      |   |  |          | Column A Debtor 1 |             | Column B Debtor 2 or non-filing sp | pouse     |              |
|------|---|--|----------|-------------------|-------------|------------------------------------|-----------|--------------|
| 8.   | Unemployment compensation   |  |          | \$                | 0.00        | \$                                 |           |              |
|      | Do not enter the amount if you contend that the amount the Social Security Act. Instead, list it here:  | t received was a benef                             | t under  |                   |             |                                    |           |              |
|      | For you \$  | 0.0  | 00       |                   |             |                                    |           |              |
|      | For your spouse \$  |  |          |                   |             |                                    |           |              |
| 9.   | <b>Pension or retirement income.</b> Do not include any ambenefit under the Social Security Act.  | nount received that was                            | s a      | \$                | 0.00        | \$                                 |           |              |
| 10.  | Income from all other sources not listed above. Spe Do not include any benefits received under the Social S received as a victim of a war crime, a crime against hun domestic terrorism. If necessary, list other sources on a total below. | Security Act or paymen<br>manity, or international | ts<br>or |                   |             |                                    |           |              |
|      | · <u>VA</u>   |  |          | \$1               | 40.00       | \$                                 |           |              |
|      |   |  |          | \$                | 0.00        | \$                                 |           |              |
|      | Total amounts from separate pages, if any.  |  | +        | \$                | 0.00        | \$                                 |           |              |
| 11.  | Calculate your total current monthly income. Add lin each column. Then add the total for Column A to the tot  |  | \$       | 3,662.00          | + \$        |                                    |           | 3,662.00     |
| Part | 2: Determine Whether the Means Test Applies to  | o You  |          |                   |             |                                    | Total cui | rent monthly |
| 12.  | Calculate your current monthly income for the year.   | . Follow these steps:                              |          |                   |             |                                    |           |              |
|      | 12a. Copy your total current monthly income from line 1   | 1  |          | Сору              | line 11 h   | nere=>                             | \$        | 3,662.00     |
|      | Multiply by 12 (the number of months in a year)   |  |          |                   |             |                                    | x 12      |              |
|      | 12b. The result is your annual income for this part of the  | e form   |          |                   |             | 12b.                               | \$43      | 3,944.00     |
| 13.  | Calculate the median family income that applies to  | you. Follow these step                             | s:       |                   |             |                                    |           |              |
|      | Fill in the state in which you live.  | ОН   |          |                   |             |                                    |           |              |
|      | Fill in the number of people in your household.   | 2  |          |                   |             |                                    |           |              |
|      | Fill in the median family income for your state and size  | of household.                                      |          |                   |             | 13.                                | \$ 62     | 2,308.00     |
|      | To find a list of applicable median income amounts, go for this form. This list may also be available at the bank   | online using the link sp                           | ecified  | in the separa     | te instruct | tions                              |           |              |
| 14.  | How do the lines compare?   |  |          |                   |             |                                    |           |              |
|      | 14a. Line 12b is less than or equal to line 13. Or Go to Part 3.  | n the top of page 1, ch                            | eck box  | 1, There is n     | o presum    | ption of abuse                     |           |              |
|      | 14b. Line 12b is more than line 13. On the top o Go to Part 3 and fill out Form 122A-2.   | of page 1, check box 2,                            | The pr   | esumption of      | abuse is o  | determined by                      | Form 122  | ?A-2.        |
| Part | 3: Sign Below   |  |          |                   |             |                                    |           |              |
|      | By signing here, I declare under penalty of perjury   | that the information or                            | this sta | atement and i     | n any atta  | achments is tru                    | e and cor | rect.        |
|      | X /s/ Mark Edward Cunningham  |  |          |                   |             |                                    |           |              |
|      | Mark Edward Cunningham Signature of Debtor 1  |  |          |                   |             |                                    |           |              |
|      | Date April 16, 2019   |  |          |                   |             |                                    |           |              |
|      | MM / DD / YYYY  | o 122A 2   |          |                   |             |                                    |           |              |
|      | If you checked line 14a, do NOT fill out or file Form   |  |          |                   |             |                                    |           |              |
|      | If you checked line 14b, fill out Form 122A-2 and fi  | lie it with this form.                             |          |                   |             |                                    |           |              |

Official Form 122A-1

**Chapter 7 Statement of Your Current Monthly Income** 

page 2

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## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation        |
|------------|--------------------|
| \$245      | filing fee         |
| \$75       | administrative fee |
| + \$15     | trustee surcharge  |
| \$335      | total fee          |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

|   | \$200 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$275 | total fee          |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

|   | \$235 | filing fee         |
|---|-------|--------------------|
| + | \$75  | administrative fee |
|   | \$310 | total fee          |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

page 3

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.</a>

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

## Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### United States Bankruptcy Court Northern District of Ohio

| In re    | Mark Edward Cunningham   |   | Case No                         | ).                      |                 |
|----------|--|---|---------------------------------|-------------------------|-----------------|
|          |  | Debtor(s)   | Chapter                         | 7                       |                 |
|          | DISCLOSURE OF COMPENSAT  | TON OF ATTOI                                      | RNEY FOR I                      | DEBTOR(S)               |                 |
| cc       | pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I compensation paid to me within one year before the filing of the rendered on behalf of the debtor(s) in contemplation of or in our contemplation. | petition in bankruptcy,                           | or agreed to be pa              | id to me, for services  |                 |
|          | For legal services, I have agreed to accept  |   | \$                              | 1,600.00                |                 |
|          | Prior to the filing of this statement I have received  |   | \$                              | 1,600.00                |                 |
|          | Balance Due  |   |                                 | 0.00                    |                 |
| 2. T     | ne source of the compensation paid to me was:  |   |                                 |                         |                 |
|          | ■ Debtor □ Other (specify):  |   |                                 |                         |                 |
| 3. T     | ne source of compensation to be paid to me is:   |   |                                 |                         |                 |
|          | ■ Debtor □ Other (specify):  |   |                                 |                         |                 |
| 4.       | I have not agreed to share the above-disclosed compensation  | n with any other person                           | unless they are me              | mbers and associates    | of my law firm. |
|          | I have agreed to share the above-disclosed compensation wi copy of the agreement, together with a list of the names of the   |   |                                 |                         | law firm. A     |
|          | n return for the above-disclosed fee, I have agreed to render leg  | •   |                                 |                         |                 |
| b.<br>c. | Analysis of the debtor's financial situation, and rendering adv<br>Preparation and filing of any petition, schedules, statement o<br>Representation of the debtor at the meeting of creditors and of           | f affairs and plan which                          | may be required;                | -                       | nkruptcy;       |
| d.       | [Other provisions as needed] Attorney advice regarding reaffirmation agreemen Representation of Debtor in any Trustee negotiation  |   | p to one hour.                  |                         |                 |
| 6. B     | y agreement with the debtor(s), the above-disclosed fee does n<br>Dischargeability actions, judicial lien avoidances, a  | ot include the following<br>and/or any other Adve | g service:<br>ersary Proceeding | g.                      |                 |
|          | CER  | TIFICATION  |                                 |                         |                 |
|          | certify that the foregoing is a complete statement of any agreer nkruptcy proceeding.  | nent or arrangement for                           | payment to me for               | r representation of the | e debtor(s) in  |
| Ap       | ril 16, 2019   | /s/ Dean D. Paolu                                 | cci                             |                         |                 |
| Da       |  | Dean D. Paolucci                                  | 0081997                         |                         |                 |
|          |  | Signature of Attorne Paolucci Law                 | ey .                            |                         |                 |
|          |  | 1 Cascade Plaza                                   |                                 |                         |                 |
|          |  | Akron, OH 44308                                   |                                 |                         |                 |
|          |  | 330-474-9529 Fa                                   |                                 |                         |                 |
|          |  | dean@paoluccilav  Name of law firm                | vtirm.com                       |                         |                 |
|          |  |   |                                 |                         |                 |

## **United States Bankruptcy Court Northern District of Ohio**

| In re   | Mark Edward Cunningham               |  | Case No.          |                       |
|---------|--------------------------------------|--|-------------------|-----------------------|
|         |                                      | Debtor(s)  | Chapter           | 7                     |
|         | VERI                                 | FICATION OF CREDITOR M                             | IATRIX            |                       |
| The abo | ove-named Debtor hereby verifies the | hat the attached list of creditors is true and cor | rrect to the best | of his/her knowledge. |
| Date:   | April 16, 2019                       | /s/ Mark Edward Cunningham                         |                   |                       |
|         |                                      | Mark Edward Cunningham                             |                   |                       |
|         |                                      | Signature of Debtor                                |                   |                       |

Buckeye State Credit Union 197 East Thornton Street Akron, OH 44311

Capital One PO Box 98873 Las Vegas, NV 89193

Ford Motor Credit P.o. Box 219686 Kansas City, MO 64121-9686

Goodyear/CBNA POB 6497 Sioux Falls, SD 57117

Macys/DSNB 9111 Duke Blvd. Mason, OH 45040

Mr. Cooper 8950 Cypress Waters Blvd. Coppell, TX 75019

One Main Financial POB 183172 Columbus, OH 43218

Sears Card Citi Cards 8725 W. Sahara Avenue The Lakes, NV 89163-0001

SYNCB/Walmart PO BOX 965024 Orlando, FL 32896

TD Auto Finance PO Box 9223 Farmington, MI 48333

TD Auto Finance PO Box 9223 Farmington, MI 48333